

VISITING SCHOLAR APPLICATION

Date _____

Request appointment from _____ to _____
Month/Day/Year Month/Day/Year

Name in Full _____
First Name Middle Name(s) Surname

Present Mailing Address _____

Telephone (office) _____ Telephone (cell) _____

Email _____ Fax _____

Country of legal permanent residence _____

Country of citizenship _____

Present Institutional affiliation (complete name and address of institution):

Title(s) or position(s) now held: _____

Degrees received:

<u>Degree</u>	<u>Granting Institution</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Area of major interest _____

Please attach a brief proposal, approximately 500 words, on your purpose of study or research as a PTS visiting scholar.

Name _____

Will you require housing? Yes _____ No _____

If no, give a local area residence address _____

Will your family join you while in residence at Princeton? Yes _____ No _____

If so, please indicate the full names of your spouse, children, and children's ages:

Spouse: _____

Dependent: _____ Age: _____

Dependent: _____ Age: _____

Dependent: _____ Age: _____

Dependent: _____ Age: _____

In case of an emergency (accident or serious illness), please notify:

Name _____ Relationship _____

Telephone Number _____ Email Address _____

International applicants must complete the following:

If already in the USA, what visa do you have? _____

If not in the USA, do you will need a J-1 visa _____ If so, please give (1) full name (no initials), (2) birth date (month, day, year), (3) birthplace (city/town/country), and (4) country of citizenship for each member of your family who will accompany you.

Spouse _____ Date of birth _____

Birthplace _____ Country of citizenship _____

Dependent _____ Date of birth _____

Birthplace _____ Country of citizenship _____

Dependent _____ Date of birth _____

Birthplace _____ Country of citizenship _____

Dependent _____ Date of birth _____

Birthplace _____ Country of citizenship _____

Please attach a current curriculum vitae and return with this application to:

Dr. M. Craig Barnes President
Princeton Theological Seminary
P. O. Box 821
Princeton, New Jersey 08542-0803 (U.S.A.)
or email president@ptsem.edu

Revised June 2016