



GRADUATE SCHOLARSHIP

Dear Program Applicant,

Thank you for your interest in applying to the Graduate Scholarship program. The Hungarian-American Enterprise Scholarship Fund's (HAESF) objective is to promote free enterprise and development in Hungary and to continue to strengthen ties between the United States and Hungary by creating opportunities for accomplished Hungarians and those of great promise to gain professional experience in the United States, thereby enhancing their contribution to Hungarian society.

The HAESF Graduate Scholarship program, endowed by U.S. Treasury funds, provides financial grants to accomplished recent Hungarian graduates to pursue terminal designation degrees that lead to professional occupations, or for professional, post-graduate, non-degree, certificate-granting programs at accredited American universities and colleges or certificate-granting institutions.

The goal of the program is to provide promising future leaders of Hungarian society an opportunity to receive international education that lead to professional occupations, thereby enhancing their contribution to their home country and its development upon their return.

Applicants are required to complete the following Application in its entirety and to submit it to the HAESF office in Budapest by the stated deadline. To help you in completing application, we have included checklists on the following page. Please use the respective checklist to guide you through the process of completing the application.

For further assistance, you may contact HAESF's Program Officer in Budapest at any time by phone (+36-1-413-0018) or by email (info@haesf.org). Additional instructions and information can also be found on HAESF's main program website at <http://www.haesf.org/graduate/description.html>.

Thank you again for your interest in HAESF's Graduate Scholarship.

Sincerely,

A handwritten signature in blue ink that reads "Elizabeth Simon".

Elizabeth Simon
Executive Director



APPLICATION CHECKLIST

HAESF Graduate Scholarship candidates will be assessed on the applicant's academic and professional qualifications. Candidates must include the following documents with the application:

- Application Form
- One passport size photograph
- Acceptance Letter from the receiving academic institution in the U.S.
- Estimated cost of attendance from receiving academic institution
- Detailed Budget Proposal (part of the application)
- Personal Statement
- A copy of your current CV or resume
- A copy of your university diploma and diploma supplement along with its English translation.
- Copies of any other relevant certificates of completion (from technical/trade colleges, apprenticeships, etc.) and their English translations
- 2 Letters of reference (1 academic, 1 professional/experiential). Letters should be written or translated into English and discuss the following issues:
 - Nature of relations with applicant
 - Fellowship's relevance for applicant's future and career goals
 - Assessment of applicant's character, abilities, strength, and weaknesses
 - Detailed contact information of the referee
 - Letters of reference should be submitted in signed and sealed envelopes

NOTE: All Hungarian-languages documents, certificates, etc. must be translated into English. All documents, including application forms, photos, certificates, etc. must be submitted in 2 copies (one copy of transcripts and diploma is sufficient).


PLEASE TELL US HOW YOU LEARNED ABOUT THE HAESF GRADUATE SCHOLARSHIP?

- Professor/Academic Advisor
- Poster (provide location):
- Email, newsletter (please, list):
- Advertisement (name of publication):
- Friends or relatives
- Web search/other websites (please, list):
- Article, program (please, list media source):
- Job or study abroad fair (provide location):
- Other (please, list):

FOR ALL APPLICATION, ACCEPTANCE, AND PRE-DEPARTURE INFORMATION AND QUESTIONS, PLEASE CONTACT:

Kati Szalay
CIEE EXCHANGES, INC.
Kereskedelmi Képviselete
(HAESF Ösztöndíj Alap)
Andrássy út 61., I/5.
Budapest
1062 Hungary

Tel: (36-1) 413-0018
Fax: (36-1) 413-0019
Email: info@haesf.org

PERSONAL DETAILS (Please complete as they appear on your passport)		PASSPORT PHOTO
Last name:		Please attach a passport sized photo here: 
First name:	Middle name:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
Date of birth (dd/mm/yyyy):		
City of birth:		
Country of birth:		
Country of citizenship:		
Country of legal permanent residence:		
Passport number:		
Passport expiration date (dd/mm/yyyy):		

CONTACT INFORMATION	
Current street address:	
City:	Postal code:
Telephone (country code/city code/number):	Mobile (country code/city code/number):
Email (mandatory):	At this address until (dd/mm/yyyy):
Permanent address: <input type="checkbox"/> (Check if same as above)	
City:	Postal code:
Telephone (country code/city code/number):	Mobile (country code/city code/number):

EMERGENCY CONTACT (Please enter next of kin)	
Last name:	
First name:	Middle name:
Street address:	
City:	Postal code:
Telephone (country code/city code/number):	Mobile (country code/city code/number):
Relationship to applicant:	

PERSONAL STATEMENT
<p>While your resume will detail your professional and academic background, the focus of your Personal Statement should be your career goals and internship expectations. Please attach your Personal Statement (at least 1,000 words, double-spaced) on a separate sheet of paper addressing the following items in a continuous essay written in English:</p> <ol style="list-style-type: none"> 1. Please explain why you wish to apply for this Graduate Scholarship. 2. Describe in detail your career goals and objectives; describe your areas of interest within a chosen field and explain why these particular areas are of interest to you. 3. Explain what challenges/problems the field you are interested in faces in the upcoming years; explain further what solutions/improvements you would propose to successfully address those issues. 4. Describe yourself: your personal qualities (strengths and weaknesses) and professional skills. 5. Please explain how this Graduate Scholarship will assist you in fulfilling your future career and personal goals upon your return to Hungary. 6. Please explain how your participation in this Graduate Scholarship program will contribute to Hungary's continued development.



U.S. INSTITUTION

1. Field/industry of interest:		
2. Specialization(s) within the field of interest (if any):		
3. Name of school you have applied to:		
Street address:		
City:	Postal code:	Country:
Telephone:	Fax:	Website:
Name and Title of Contact Person:		
Telephone:	Fax:	Email:
4. Name of the program you have applied to:		
5. Have you been accepted to the program: <input type="checkbox"/> Yes <input type="checkbox"/> No		
6. If no, expected notification date:		
7. Length of the program (in months):		
Mandatory internship: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, length of internship:		
Program start date (dd/mm/yyyy):		Program end date (dd/mm/yyyy):
Date of departure to U.S. (dd/mm/yyyy):		Date of return to home country (dd/mm/yyyy):
Number of months completed:		
8. What type of visa will you be issued by your receiving institution:		

TOTAL BUDGET & FUNDING

1. Explain in detail how you are planning to fund your studies in the U.S.:		
2. Have you applied for additional funding from any other sources than HAESF: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please fill out organization name(s) below:		
Organization name:	Amount:	
Organization name:	Amount:	
Organization name:	Amount:	
3. If your studies are going to be partially funded by other sources, please list those sources:		
School grant: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	
Another scholarship: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	
Parents: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	
Personal funds: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	
Other: <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount:	



GRADUATE SCHOLARSHIP

Scholarship awards vary from individual to individual depending on the estimated cost of attendance and overall financial need. The maximum amount a scholarship recipient is eligible to receive is \$25,000 USD per year for up to three years. Depending on individual circumstances, the scholarship may cover the following:

- Tuition & Fees
- Books & Supplies
- Room & Board
- Student Health Insurance
- Personal Expenses
- One round-trip economy based airfare

Awards DO NOT cover:

- Dependents
- Vacation or leisurely travel in the U.S.
- Gift or pleasure shopping
- Hardware or equipment purchases (computers, laptops, printers etc.)
- Additional expenses that pertain to lifestyle preferences

To be considered for the HAESF Graduate Scholarship, applicants are required to submit the estimated cost of attendance from the receiving institution as well as to disclose all sources of funding (university grant, fellowship, loan, personal, etc.) that they will have available to them for each year.

INSTRUCTIONS

Step 1: Complete Estimated Cost of Attendance table below. Applicants should include a letter from the Admission's Office or include a print out of the estimated cost of attendance.

Year 1	
	Cost of Attendance
Tuition & Fees	\$
Books & Supplies	\$
Room	\$
Board	\$
Personal Expenses	\$
Health Insurance	\$
Airfare	\$
Other (explain*)	\$
Annual Total	\$

*On a separate page, please explain in detail any additional costs directly associated with attending the post graduate program.



Step 2: Applicants should use the budget template below to demonstrate how they plan to fund their program. The annual total cost of attendance listed above should match the budgeted total listed below.

Year 1	
Funding Source	Amount
Personal	\$
Loan	\$
Scholarships/Fellowships	\$
HAESF Graduate Scholarship	\$
Budgeted Total	\$

Applicants who have applied for or are receiving other scholarships or fellowships should disclose each source and award amount(s) below:

HAESF will apply awarded scholarship funds to tuition and fees first, which will be paid directly to the receiving institution. All other costs, including room and board will be disbursed directly to the applicant after confirming their arrival in the U.S.

Step 3: Following the instructions above, complete for each year of postgraduate studies.

Year 2	
	Cost of Attendance
Tuition & Fees	\$
Books & Supplies	\$
Room	\$
Board	\$
Personal Expenses	\$
Health Insurance	\$
Airfare	\$
Other (explain*)	\$
Annual Total	\$

*On a separate page, please explain in detail any additional costs directly associated with attending the post graduate program.

Year 2	
Funding Source	Amount
Personal	\$
Loan	\$
Scholarships/Fellowships	\$
HAESF Graduate Scholarship	\$
Budgeted Total	\$



Year 3

Cost of Attendance	
Tuition & Fees	\$
Books & Supplies	\$
Room	\$
Board	\$
Personal Expenses	\$
Health Insurance	\$
Airfare	\$
Other (explain*)	\$
Annual Total	\$

*On a separate page, please explain in detail any additional costs directly associated with attending the post graduate program.

Year 3

Funding Source	Amount
Personal	\$
Loan	\$
Scholarships/Fellowships	\$
HAESF Graduate Scholarship	\$
Budgeted Total	\$

Applicants should use the budget template to demonstrate how they plan to fund their program for year 3. The annual total cost of attendance listed above should match the budgeted total.



PARTICIPANT DECLARATION

1. Each applicant agrees that all the information provided in the application is true to the best of his/her knowledge, and acknowledges that any false or misleading information may lead to immediate dismissal from the program. Reference letters submitted as part of the application package are to be written by the referee, not by the applicant and simply signed by the referee. Personal statements must represent the applicant's original work and thoughts, and are not to be copied from any other source, e.g., internet templates or previous applicants' work. Plagiarism of any kind will lead to automatic dismissal from the program.
2. The Hungarian-American Enterprise Scholarship Fund is a competitive fellowship award and therefore reserves the right to select a limited number of applicants to receive the award, who the selection committee decides best embody the values, goals and objectives of HAESF.
3. HAESF makes no representation or warranty of any kind, expressed or implied as to the suitability of the Fellowship for any participant and HAESF disclaims all such warranties to the full extent of the law.
4. The Fellow is responsible for considering his or her personal health and safety needs, and those of any accompanying family members, when applying for or accepting the Fellowship. If the Fellow suffers from any health or other condition that would create a risk for him/her while abroad, he or she should not apply.
5. The Fellow is responsible for reading and carefully considering all materials made available that relate to safety, health, legal, environmental, political, cultural and religious customs and conditions in the U.S. Fellow must take full responsibility in the event that laws, regulations, or customs are broken, regardless of foreknowledge.
6. Fellowship award amounts are based on the information submitted as part of this Application and are confirmed to applicants in the form of an award report that they are required to sign and date. Fellow should be prepared to cover all other costs associated with his or her study program in the U.S.
7. It is the responsibility of the Fellow to exercise due care once in possession of the legal documentation and visa for his or her program. The cost of replacing these items due to lack of care must be borne by the Fellow.
8. Fellow agrees to inform HAESF/CIEE immediately in the event that his or her funding levels – including from personal funds, loans and other scholarships—change significantly.
9. Fellows are required to comply with all requirements of their sponsoring institution, in particular with regard to SEVIS registration and health insurance. Dismissal of the Fellow by the sponsoring institution will result in the immediate termination of the Fellowship and Fellow may be required to refund some or the entire award amount. CIEE/HAESF cannot be held responsible for any insurance claims in the event that Fellow has failed to secure adequate insurance.
10. Fellow acknowledges that HAESF's continued financial support is contingent upon her or his successful progress toward her or his stated study objectives. Specifically, Fellow recognizes that she or he must maintain at least a 3.0 GPA in order to receive additional funding.
11. HAESF reserves the right to dismiss from the Program any Fellow who is deemed by HAESF to be a danger to him or herself or others or whose conduct is deemed to be detrimental to the Program. In the event of such a dismissal, HAESF shall not be held responsible for any airfare, charges, or any other expense incurred by the Fellow.
12. The Fellow shall be responsible for and held liable for all his or her acts along with any loss or damage that results from those acts while he or she is on the Program. In the event that HAESF, its affiliates and overseas cooperators, and/or any respective employees, agents and representatives of any of these entities suffer any loss or damages as a result of the acts of the Fellow, then the Fellow agrees to indemnify the party that suffered such loss or damages. Such claims for indemnification shall cover any and all reasonable claims, causes of action, judgments, losses, costs, or expenses which may be made against any of the parties listed or which said parties may suffer or incur as a result of or relating to acts of the participant.
13. The Fellow must supply HAESF with the name and contact details of next of kin, to be contacted in the case of emergency on the application form.
14. All travel before, during and after the program is at the Fellow's own risk. Any participant who chooses to operate motorized vehicles is responsible for obtaining the necessary license, permission, and insurance and does so at his/her own risk.
15. While HAESF will always endeavor to fulfill its responsibilities, HAESF cannot accept liability or responsibility for alterations, delays, acts of government or public authority or other circumstances amounting to a "force majeure".
16. Fellow understands that, upon completion of the HAESF program, she or he is required to return to Hungary for a minimum of three years, and is not permitted to stay or attempt to stay in the U.S. or any other foreign country, including to work or pursue work. Fellow understands that, in the event that she or he does not meet the three-year residency requirement without the express consent of HAESF or CIEE, she or he may be required to refund the entire Fellowship amount.

I hereby waive and release HAESF, its affiliates and overseas co-operators, and their respective employees and representatives, to the maximum extent permitted by law, from any claims, causes of action and liability for any loss or damage (including, without limitation, damage to property, personal injury, illness or death) suffered or incurred in connection with the HAESF Fellowship Program or Fellowship, whether based on breach of contract, statutory duty or warranty, negligence or any other grounds. I will indemnify HAESF, its affiliates and overseas cooperators, and their respective employees and representatives of any loss or damage incurred or suffered by them and caused by me in connection with the Program.

I agree to abide by all HAESF program rules and by United States government laws pertaining to my visa status. I have carefully read and agree to honor the details of my Fellowship, and also acknowledge my responsibility to strictly follow the rules and regulations of my host and sponsoring institution in the U.S.

I understand that HAESF's sponsorship authorizes me to complete a program of study only at the institution cited in this Application. I understand that I am not authorized to seek or carry out any other study, training or employment during the period covered by HAESF's sponsorship.

I certify that all of the statements in this form are correct and that I have carefully read the conditions of this program. I am aware that any violation of program conditions may cause HAESF to withdraw its sponsorship and that I will not be entitled to any reimbursement of costs.

Applicant's signature:

Date: