

**UW SCHOOL OF NURSING
CITIZENS OF THE WORLD SCHOLAR TRAVEL AWARD**

The Citizens of the World Scholar Travel Award encourages and assists matriculated nursing students to seek experiences of **immersion** in health care and society in a culture very different from their own. A top priority is international health, but cross-cultural work in the United States also qualifies for this support. The Citizens of the World Scholar Travel Award provides reimbursement of airfare up to, but not to exceed \$1,200. This program has assisted over 200 undergraduate and graduate students in the School to pursue unique experiences in more than 50 countries.

Citizens of the World Scholars locate experiences with the help of various resources and organizations within and outside the University of Washington. Students make their own arrangements with a faculty sponsor here. In addition to independent projects that a student initiates and organizes via two credits of independent study, the School and University offer cultural immersion experiences, led by faculty members, in which undergraduate and graduate students may enroll toward completion of a Citizens of the World Scholar project. In all cases the student must obtain approval of the proposed course(s) from a faculty sponsor and submit a recommendation from the faculty sponsor.

Applications to the Citizens of the World Scholar Travel Award are accepted once a year, on **April 1**, for experiences taking place that calendar year (if the first falls on a weekend, the deadline is on Monday). If the recipient is graduating that year, the experience must take place **BEFORE** graduation. The complete application with attachments and the faculty sponsor recommendation must be submitted in hard copy to COTWS Travel Awards, UW School of Nursing, Box 357260, or brought to T-310 no later than 5:00 pm on the deadline date.

A key consideration for eligibility is cultural immersion for a sufficient length of time to gain understanding. The selection panel will base funding decisions on the fit between the proposal and the priorities of this program, the merits of the proposal, and the availability of continued funding from the Hegyvary Citizens of the World Endowed Fund. Decisions are announced before May.

It is critical that all pertinent documents and information related to the experience (e.g. initial letters of support from the site; contact names, addresses, telephone and fax numbers at the site) be submitted with your application. For clinical initiatives, we require the identification of an on-site preceptor with whom we will arrange an inter-agency memorandum of understanding for clinical placement and supervision; the time required for these arrangements can be lengthy.

The Citizens of the World Scholar Travel Award does not support the ongoing and usual academic or clinical assignments necessary to meet regular course objectives, but instead supports experiences that extend significantly beyond degree requirements. This program is unlikely to fund proposals: wherein the student will be on site for less than seven full days; wherein the activities of the student will include spreading of religious or political beliefs to those of another culture; for attendance at international conferences; or for groups of traveling Americans whose main contact is with each other. If participation is cancelled for any reason, funds must be returned to the University. The applicant is responsible for any cancellation fees charged by the airline.

The School is grateful to donors to the Hegyvary Citizens of the World Endowed Fund for providing the crucial support that enables students to pursue highly beneficial cultural immersion experiences.

**UW SCHOOL OF NURSING
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APPLICATION FORM**

This application form has five sections, plus a two-page form for the faculty sponsor recommendation.

I. Information about the Applicant

LAST NAME	
FIRST NAME	
MAILING ADDRESS	
PHONE NUMBER	
UW E-MAIL ADDRESS (required)	
NON-UW E-MAIL ADDRESS (optional)	
DEGREE PROGRAM	
EXPECTED GRADUATION QUARTER	
CUMULATIVE GPA (up to date)	

Prior to the experience, students must be in good academic standing, meet Essential Qualifications, and have a minimum cumulative GPA of 2.0 for undergraduate students and 3.0 for graduate students.

II. Information about your Faculty Sponsor and the Site

DATES OF PROPOSED ACTIVITY	
NAME OF YOUR UW FACULTY SPONSOR	
EMAIL ADDRESS OF YOUR UW FACULTY SPONSOR	
COURSE & CREDITS YOU WILL TAKE	
<i>Students must be matriculated and enroll for minimum 2 credits in the quarter of the experience. BSNs register for NMETH 499. Masters and PhD students register for NURS 599 or NMETH 600. If you are taking an Exploration Seminar or similar program, name it and state what credits are associated with it, and attach the program description.</i>	
TOWN/CITY and COUNTRY of SITE	
SITE NAME (institution/organization/school/other)	
NAME OF ON-SITE SPONSOR	
TITLE OF ON-SITE SPONSOR	
EMAIL ADDRESS OF YOUR ON-SITE SPONSOR	
SITE MAILING ADDRESS	
HOW DID YOU FIND THIS OPPORTUNITY?	

III. Structure for the Proposal

Attach a proposal that addresses all of the following points in no more than two pages.

Outline the academic/scholarly **objectives** for this experience.

Describe the **experiences** to be sought, and how they extend beyond and augment your regular course of study in the School of Nursing.

Describe your **current knowledge, skill and readiness** for this experience, including relevant language skills, and state how you plan to prepare for maximum benefit from the experience.

Describe your **previous international and cross-cultural experiences**, and how they differ from and provide a basis for the proposed experience.

State how this experience will promote your personal **goals** and development, as well as the goals of the School of Nursing and the University of Washington.

Mention what other **sources of support** you may have for meeting the expenses of this opportunity.

State at least one structured way in which you will **share the experience** with faculty and students in the School of Nursing upon your return.

IV. Mandatory Commitments

If funded, I commit to sharing my experiences in the following four ways:

Write a brief thank you note prior to departure addressed to “Donors of the Citizens of the World” and submit it to Development Office, Attn: COTWS Travel Awards, UW School of Nursing, Box 357260.

Write a second thank you note upon return from the experience. Please share a bit about your pursuits and how their support has assisted you in furthering your education. Let them get to know you a little in the note. Address it as instructed above.

Write a post-trip summary within one month of return, using the provided template on the Citizens of the World Scholar Travel Fund website called the “International Experience Evaluation Form”. This summary must be submitted both to the sponsoring faculty member **and** to the Director of International Programs in UW SoN Academic Services.

Present to the community about your experience at least once, and disseminate information through other methods agreed upon with the Director of International Programs.

YES NO

V. Mandatory Acknowledgements

I have read, printed, and **attached** the US State Department Travel Warning Web site information for the country of my proposed experience at http://travel.state.gov/travel/cis_pa_tw/tw/tw_1764.html. I understand that review of my application will include consideration of travel warnings.

YES NO

If funded, I commit to paying tuition for a minimum of 2 credits in the quarter of the experience. I agree to forfeit award funds if not registered during the quarter of my COTWS Travel Award experience.

YES NO

I understand that if the post-trip summary is not submitted in a timely manner, future registration may be blocked and that I will be billed for the amount of the award.

YES NO

I understand that my health fee will not cover post-exposure prophylactic care while I am abroad.

YES NO

I have read about and am aware of the availability of student travel insurance at <http://ipe.washington.edu/domestic/insurance.html>. I understand it is my personal responsibility to secure insurance for my experience.

YES NO

I certify that I have read and understand the requirements of the Citizens of the World Scholar Travel Award, and that all materials I have submitted for consideration are complete and accurate. I understand that failure to complete these requirements will result in forfeiture of my Citizens of the World Scholar Travel Award.

Applicant Signature: _____ Date: _____

**UW SCHOOL OF NURSING
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FACULTY SPONSOR RECOMMENDATION

Applicant Name: _____

TO THE STUDENT APPLICANT:

1. Read through this entire form. Write your name above AND at the top of the next page.
2. Sign below if you wish the recommendation to be held in confidence from you by the UW School of Nursing. Do not sign below if you wish to have access to your recommendation if you are accepted as a COTWS Travel Awards and begin the program (it remains confidential until such time).
3. Give this form to the faculty member writing your recommendation. This faculty sponsor should complete this form and return it in a sealed envelope to Director of International Programs, UW School of Nursing Academic Services, Box 357260, or drop it by T-310 by 5:00 pm, April 1 (if this falls on a weekend, the following Monday).

Letters of recommendation on behalf of applicants for acceptance to the COTWS Travel Awards program will be placed in open files for review by the accepted student after commencing the experience unless the student waives the right to review the recommendation. An applicant signature below indicates that this recommendation will not be available to the student for review at any time and will be treated as confidential. Applicants who are denied or who do not begin the experience do not have access to this form at any time.

It is my understanding that waiving my right to review this recommendation is not required as a condition of acceptance, receipt of financial aid, or other University service, and is entirely voluntary. Accordingly, I hereby waive any and all rights to inspect and review this recommendation.

Signature of Applicant: _____ Date: _____

TO THE FACULTY SPONSOR:

Thank you for agreeing to sponsor a student as a Simpson Global Service Learning Fellow.

Your **role and responsibilities as faculty sponsor** are as follows:

- A. The faculty sponsor **recommends** the student and supports their application. If a faculty sponsor is also a member of the Review Committee, s/he will not participate in deliberations regarding his/her sponsored student. Letters of recommendation may be viewed by students unless they have signed above to waive their right to do so.
- B. The faculty sponsor creates a **pre-trip agreement** with the student outlining expectations for the experience and earning of credit. The faculty sponsor may wish to consider C/NC options.
- C. The faculty sponsor facilitates the student's registration in NMETH499 (undergraduates) or NURS 599 or NMETH 600 (graduate students).
- D. The faculty sponsor outlines **learning objectives** for the student's experience as well as methods for **evaluating** outcomes.
- E. The faculty sponsor meets with the student for a **post-trip debriefing**. The post-trip summary document must be submitted to the faculty member, with a copy to the Director of International Programs in Academic Services, *before the end of the quarter* in order to receive credit for the course. If the post-trip summary has not been submitted by the deadline, the student will receive a grade of "Incomplete" on his/her transcript and will be billed for the amount of the award.
- F. The faculty sponsor **submits a grade** to the registrar's office following the post-trip meeting and review of the post-trip summary.

(see page 2)

**UW SCHOOL OF NURSING
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FACULTY SPONSOR RECOMMENDATION Page 2**

Applicant Name: _____

FACULTY SPONSOR NAME AND DEPARTMENT: _____

FACULTY SPONSOR SIGNATURE AND DATE: _____

Please provide the following information about the applicant and send it in a sealed envelope to Director of International Programs, UW School of Nursing Academic Services, Box 357260, or drop it by T-310 by 5:00 pm, April 1 (if this falls on a weekend, the deadline is that Monday).

Characteristics of Applicant:	Low					High
1. Clarity of goals for this experience	1	2	3	4	5	
2. Cognitive readiness to benefit from the experience	1	2	3	4	5	
3. Social/emotional readiness to benefit from this experience	1	2	3	4	5	
4. Adaptability in stressful situations	1	2	3	4	5	
5. Quality of interpersonal relations	1	2	3	4	5	
6. Openness to new ideas and perspectives	1	2	3	4	5	
7. Probability that persons at the host site will benefit from student's experience.	1	2	3	4	5	
8. Capability as "informal ambassador" for School, UW and USA	1	2	3	4	5	

COMMENTS: Please provide any additional comments that may help us with selection of excellent Citizens of the World Scholars.