

# TURKISH COALITION *of* AMERICA

*Fostering Understanding of Turkish American Issues through Public Education*



**Program Background:** TCA will award grants of \$2,000 per year for full-time undergraduate and graduate students who have been accepted to a study abroad program in Turkey for a semester or summer.

**Eligibility:** Applicants must be US citizens of Armenian heritage, who have already applied and been accepted to participate in a study abroad program at a Turkish university through an American educational institution or study abroad provider.

Applicants must be:

- U.S. citizens of Armenian heritage
- Full-time students in good standing at an accredited American university or college
- Accepted to study a semester abroad at a Turkish university

## **Selection Criteria**

Candidates must present documentation to the Turkish Coalition of America verifying the above criteria.

## **How to Apply**

Applications are accepted on a rolling basis. Please read the following instructions carefully. Submit the following items.

- COMPLETED APPLICATION FORM WITH PICTURE (see attached)
- DOCUMENTATION VERIFYING PARTICIPATION in a study abroad program at a Turkish university (Send a copy of your acceptance letter from the school or organization with whom you will study with in Turkey.)
- RESUME: Must be submitted on one single-sided 8.5" x 11" sheet of paper.
- OFFICIAL TRANSCRIPT: Must be original. Transcripts may NOT be sent separately.

Incomplete application forms will not be considered.

Upon acceptance of application, TCA will mail a check to the candidate's permanent address prior to his or her departure to Turkey. Please note that TCA's program is limited to providing a grant of \$2,000 or \$1000 per student to help cover travel and living expenses. TCA is not responsible for placing students at Turkish universities, finding housing, internships or other forms of financing.

**TURKISH  
COALITION of  
AMERICA**

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TICA

Please print or type out the application in blue or black ink.

Attach a  
Passport  
Photo Here

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Place of Birth (City, Country): \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Are you a U.S. Citizen or Permanent Resident?  Yes  No

School in the United States: \_\_\_\_\_

Academic Level:  Freshman  Sophomore  Junior  Senior  Graduate

Major: \_\_\_\_\_ Current and Cumulative GPA: \_\_\_\_/\_\_\_\_

School to be Attended in Turkey: \_\_\_\_\_

Term of Attendance:  Summer < 4 weeks  Summer 4 or more weeks  Fall  Spring

Which organization/school/study abroad program are you travelling with? \_\_\_\_\_

Date of Arrival in Turkey: \_\_\_\_\_

Please submit your complete application to the following address:

Turkish Coalition of America  
1025 Connecticut Avenue NW  
Suite 1000  
Washington, DC 20036

## **Acknowledgment, Agreement and Signature**

I hereby certify, acknowledge and agree as follows:

1. To the best of my knowledge, the information I have provided in this application and my supporting documents are accurate.
2. I have not knowingly withheld any facts or circumstances that could mislead TCA.
3. By submitting this application, I am giving my approval for TCA to verify all information I have provided and, when requested, I will fully cooperate with TCA in this endeavor.
4. I understand it is my responsibility to ensure that my application and all supporting documents are (i) clearly marked with my name (ii) submitted to TCA .
- 5 . I understand and agree that (i) the grant decision is solely made by TCA at its absolute discretion, (ii) such decision shall be deemed final and (iii) such decision shall not be subject to further review, reconsideration, challenge or appeal.
6. In the event I fail to participate in the study abroad program in Turkey, I agree to reimburse TCA for the full amount of the grant.
7. I understand that to receive payment of this scholarship, I may be required to provide further proof of enrollment and/or of travel arrangements to Turkey.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_