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## 2012 MEXICAN GOVERNMENT SCHOLARSHIP PROGRAM FOR FOREIGN CITIZENS

## APPLICATION FORM A



## ACADEMIC ACTIVITY TO BE CONDUCTED IN MEXICO

Institution:				Level of studies:			
Program start date:		<u>   </u>		Program end date:	/	/	
	Day	Month	Year	-	Day	Month	Year
If you have already st	tarted th	ne progra	m:				
Start date:	Current academic year:						
Current GPA/Other e	valuatio	ons:					
Period for which the s			quested				

#### Supporting documentation must be attached

### **GENERAL INFORMATION**

	Paternal Last Name	womer's maluen name	First Name (s)		
Nationality:	·		,,,,,,		
Sex: (F)	(M)	Date of Birth	: / / Year Month Day		
Marital Status:	Single () Married () Free u	inion () Divorced () Other: (sp	pecify)		
Name of spou	se:	Nationality			
Address:	Street Address				
	Street Address				
City	State/Province	Country	Zip code		
Telephone (wi	th country code):	Office teleph	none:		
Email (*):					
(*) The Foreign M	inistry may contact you officially by e	mail.			

-HANDWRITTEN APPLICATIONS WILL NOT BE ACCEPTED-

## ACADEMIC COORDINATOR OR ADMISSIONS CONTACT AT THE MEXICAN INSTITUTION

Name:	
Position:	_
Telephone:	-
Email:	
¿Do you have another scholarship or are you applying for	r another scholarship for the same program or research in
addition to the Foreign Ministry scholarship?	Yes () No ()
From which institution:	
Period	
	NFORMATION
Bachelor's degree:	Grade Point Average (GPA):
Institution:	
City and country:	
Master's degree, medical specialization or subspecializat	
Institution:	
GPA:	City and country:
Doctorate:	
	Start and end dates:
GPA:	
	country and years. Attach supporting documentation.
Languages Native language: Other languages: If the native language is not Spanish, indicate proficiency language center or university.	y in Spanish and attach supporting document issued by a
EMPLOYMENT	BACKGROUND
	estitution or Company:
Previous Employment	
Institution or company:	Position:
Dates started and ended:	
Specify what type of employment you will have in your co	

#### **TEACHING OR RESEARCH ACTIVITIES**

\_\_\_\_

Indicate the teaching activity or research that you are engaged in, the institution and dates:

\_\_\_\_\_

#### **RECENT PUBLICATIONS**

Titles of the three most recent publications related to the planned activity (give dates):

#### HONORS, AWARDS AND SCHOLARSHIPS/GRANTS

Academic awards, honors, etc. received:		
Have you previously had a Foreign Ministry scholarship:	yes ( ) no ( )	Dates:
Academic activity:	Institution:	
Other scholarships for studies or research abroad. In conducted and start and end dates.	dicate granting institution,	country where the activity wa

#### ADDITIONAL INFORMATION

Has your spouse applied	I for or have a scholarship to stud	dy in Mexico? yes() no(	)			
Períod: Granting institution:						
Economic dependents:						
Relationship	Full Name	Date of Birth	Sex			
			T			
	esides in Mexico, state date of ar	Day Month Year				
Street Address						
Email:	code):	Cellular phone:				
		RGENCY, NOTIFY:				
Relationship:		Country:				
Fax:		mail:				

I accept the terms and conditions of the 2012 Foreign Ministry Scholarship Program for Foreign Citizens, which include the Terms and conditions for Recipients of the Foreign Ministry Scholarships.

Signature of the Applicant

**Place and Date** 

Important Note: The information contained in this application will be verified by the Foreign Ministry. The inclusion of false information is grounds for cancellation of the application.

# **OFFICIAL NOMINATION OF THE CANDIDATE BY HIS/HER GOVERNMENT\***

THE GOVERNMENT OF \_\_\_\_\_

OFFICIALLY NOMINATES \_\_\_\_\_

AS ITS CANDIDATE FOR A SCHOLARSHIP FROM THE MEXICAN GOVERNMENT, THROUGH THE MINISTRY OF FOREIGN AFFAIRS.

NAME OF THE NOMINATING OFFICIAL:

POSITION:	 	 ······································		·
	 	 <u> </u>	. <u></u>	
ADDRESS:	 	 ·····		
TELEPHONE:	 	 		<u> </u>
EMAIL:	 	 		

SIGNATURE

PLACE AND DATE

INSTITUTIONAL SEAL

\* An official communication from the institution responsible for scholarships in the candidate's country can be submitted instead of this format.