



Caen Scholarship Application

Application Instructions

The completed application packet should consist of the following:

- Completed Caen Scholarship Application
- Statement of Purpose: describe your goals for your semester in Caen, and reasons why you should be considered for the scholarship in a one page essay.
- Official transcripts of college/university coursework
- Two letters of recommendation addressed to the Caen Scholarship Committee.
 - At least one letter should be from a French teacher. Caen Scholarship Letter of Recommendation Forms (included in this packet) should be attached to each letter.
- Evaluation of French Language Proficiency Form.
- Current photo of yourself: make sure it is a close-up, like the one you would have for a driver's license. An informal photo is okay.

Deadline for submission: January 13, 2020

The application and all supporting documents should be submitted to the address below:

Lexington Sister Cities Commission
ATTN: Caen Scholarship Program Committee
200 E. Main Street
Lexington, KY 40507

Caen Scholarship Program

General Information

Purpose:

The purpose of the Caen Scholarship Program is to provide the opportunity for an education abroad experience at the University of Caen, allowing students the chance to improve in linguistic knowledge and gain international experience by studying for a semester at the University of Caen.

Requirements:

For applying:

- Student must be 18 years of age or older
- Student must have completed at least one year of college/university.
- Student must have a good knowledge of the language allowing them the ability to engage in classes conducted fully in French.
- Student must be willing to spend an entire semester in France.
- Must be interviewed and selected by Sister Cities Committee

Upon selection:

- Attend two orientations:
 - One after acceptance and one before departure for France.
- Comply with the instructions given by the Education Abroad advisor in order to obtain student visa and other documents in a timely manner.
 - This includes:
 - Maintaining communication with the University of Kentucky Education Abroad, Lexington Sister Cities, and the Deauville Jumelage during each step in the process.
 - Completing the proper materials in a timely manner for the UKEA Application, University of Caen application, as well as your Campus France application and visa papers.

Provided to the Student:

Participants in the Caen Scholarship program will receive:

- Tuition
- Housing
 - Excluding housing deposit (refunded at end of semester)
- UK tuition & fees waiver

Tuition and housing provided to the student by the Deauville Twinning Committee.

Continued on next page

Responsibility of Student:

Selected students are responsible for:

- Roundtrip airfare to France
- Transportation from Paris to Caen (methods of transportation will be discussed at orientations)
- Housing Deposit – approximately 175 euro (refunded if dorm left in good condition and key is returned)
- Student Card – approximately 190 euros
- Student Social Security – 215 euros
- Travel Medical Insurance – contact Education Abroad for cost
- UKEA application fee and administrative fee
- EAP 599 fee
- Campus France fee
- Travel to and from the French consulate in Chicago
- Any fees for obtaining your visa
- Meals
- Submissions to the Lexington Sister Cities Blog
- Thank you letter to Deauville Twinning Committee upon completion of program

To see a budget of the program, visit:

http://abroad.ad.uky.edu/index.cfm?FuseAction=Programs.ViewProgram&Program_ID=10851

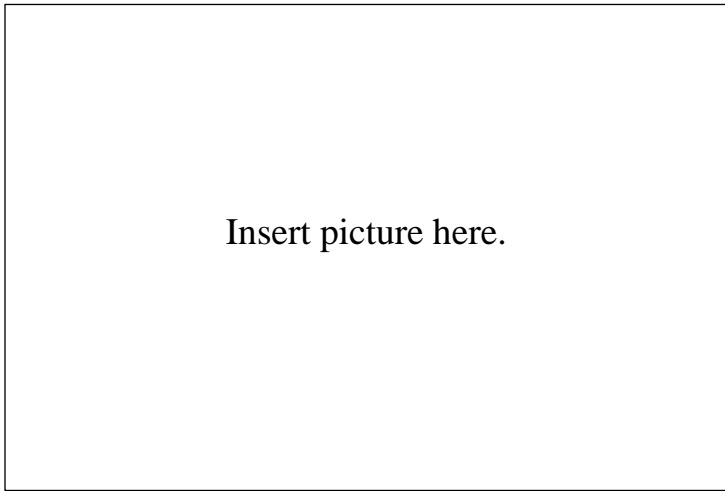
For questions, contact:

Taylor Gilkison
Assistant Director, Lexington Sister Cities
tgilkison@lexingtonky.gov
859-258-3137

OR

Laurence Tuccori
Education Abroad & Exchanges Office
UK International Center
302 Bradley Hall
859-323-2133
laurence.tuccori@uky.edu
<http://www.uky.edu/international/educationabroad>

Caen Scholarship Application



Name: _____
(First, Middle, Last)

UK ID: _____

Date of Birth: _____ / _____ / _____
Month Day Year

UK Email: _____

Non-School Email: _____

Phone: _____

Education: Institutions attended, including high school

| <u>Institution</u> | <u>Dates</u> | <u>Graduation</u> |
|--------------------|--------------|-------------------|
| | | |
| | | |
| | | |

Current Academic Status:

Freshman
 Sophomore
 Junior
 Senior
 Graduate

Current Cumulative GPA: _____ Major: _____ 2nd Major/Minor: _____

GPA in French Language Courses: _____

Semester you wish to study abroad:
 Fall 2017
 Spring 2018
 Either

College level French courses you have taken:

| <u>Course Number</u> | <u>Title</u> | <u>Grade</u> | <u>Semester</u> |
|----------------------|--------------|--------------|-----------------|
| | | | |
| | | | |
| | | | |
| | | | |

College level French courses you are taking/plan to take before beginning the Caen Scholarship Program:

| <u>Course Number</u> | <u>Title</u> | <u>Grade</u> | <u>Semester</u> |
|----------------------|--------------|--------------|-----------------|
| | | | |
| | | | |
| | | | |
| | | | |

Scholarships, awards, honors, elected offices, and achievements:

Employment History:

International Experience:

| <u>Country</u> | <u>Length of stay</u> | <u>Purpose</u> |
|----------------|-----------------------|----------------|
| | | |
| | | |
| | | |

Language Study

| <u>Language</u> | <u>High School (years)</u> | <u>College (years)</u> |
|-----------------|----------------------------|------------------------|
| French | | |
| | | |
| | | |

Interests and Recreational Activities:

Future Plans: describe your career plans.

References

List two people you have asked to provide letters of recommendation. At least one should be a French professor.

| |
|---|
| Name: _____ Email: _____ |
| School/Position: _____ |
| Phone: _____ |
| How long and in what capacity have you known this individual? _____ |

| |
|---|
| Name: _____ Email: _____ |
| School/Position: _____ |
| Phone: _____ |
| How long and in what capacity have you known this individual? _____ |

Language Evaluation

List the teacher/person whom you have asked to complete your language evaluation form.

| |
|-----------------------------|
| Name: _____ Email: _____ |
| Address: _____ Phone: _____ |

Emergency Contact Information:

List a person in the United States you wish to have notified in the case of an emergency while you are abroad.

| |
|---|
| Name: _____ Email: _____ |
| Complete Address: _____ |
| Phone: _____ Relationship to You: _____ |

Applicant Signature: _____ Date: _____

Guidelines for Letter of Recommendation

Student Name (*First, Middle, Last*)

To the recommender:

This student is applying for the Caen Scholarship Program. Two students each year will be awarded tuition and housing for a semester at the University of Caen. The applicant must be proficient in French, demonstrate academic achievement, and plan to continue French studies. Your candid appraisal of the student's propensity for a successful academic experience abroad is an important part of the application.

Students are evaluated based on:

- Their motivation for participation in the program
- French speaking abilities
- Flexibility in handling new or difficult situations
- Ability to be a good ambassador for city, country and school
- Character
- Leadership; Community & School Involvement
- Maturity

Please attach this form to your letter of recommendation.

Name of recommender: _____

Title: _____

Signature: _____ Date: _____

Letters of Recommendation are due by January 13, 2020.

Send or email to:

Lexington Sister Cities Commission
200 E. Main Street
Lexington, KY 40507

Taylor Gilkison
tgilkison@lexingtonky.gov

*Thank you for your insight and support of our program.
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Evaluation of French Language Proficiency

Student Name (First, Middle, Last) _____

To the Evaluator: Your frank appraisal of this student’s competence in French will help the Caen Scholarship Committee make the best possible selections.

Have you taught this student in a French class? Yes No
If yes, what class(es)? _____

Please rate the student’s abilities below:

| <u>Language Skill</u> | <u>Excellent</u> | <u>Good</u> | <u>Fair</u> | <u>Poor</u> |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Ability to speak French | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to understand French | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to Read French | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ability to Write French | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Please include any additional remarks or comments regarding this student’s French abilities.

Name of Evaluator: _____

Title: _____ School: _____

Signature: _____ Date: _____

Language Evaluations are due by January 13, 2020.

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