FULBRIGHT SPECIALIST PROGRAM
PROJECT REQUEST FORM

(*) Indicates the question is required.

Part I. Contacts

1. Host Institution: Name of Institution (*)

The host institution must be a degree-granting, post-secondary academic institution, comparable to a U.S. college or university, in order to promote an important program goal of fostering linkages between U.S. and non-U.S. academic institutions of higher education.

The host institution may not be a non-governmental organization (NGO), government ministry, museum, professional association, etc., although these institutions can be part of and benefit from The project.

2. Host Institution: Department/ Faculty/ Institute (*)

3. Host Institution: Street Address 1 (*)

4. Host Institution: Street Address 2

5. Host Institution: Street Address 3

6. Host Institution: City (*)

7. Host Institution: State/Province

8. Host Institution: Country (*)

9. Host Institution: Postal Code

10. Host Institution: Phone (*)

11. Host Institution: Fax

12. Host Institution: Email Address (*)

13. Host Institution: Web Address (*)

14. Host Institution: World Region (*)

15. Host Institution: Family Name of Contact (*)

16. Host Institution: First Name of Contact (*)

17. Host Institution: Title of Contact (*)

Commission/Embassy [This section to be filled out by Fulbright Commission or U.S. Embassy]

Institution type	Commission	☒U.S. Embassy
Street address 1(institution name)	Rose Garden Tower	
Street address 2	170 Ngoc Khanh	
Street address 3	Ba Dinh	
City	Hanoi	
Country	Vietnam	
Postal code	10000	
Web address	http://vietnam.usembassy.gov/fulbright.html	

Officer or responsible official from commission or U.S. Embassy making request

Prefix	Dr.
Family name	Tran
First name	Xuan Thao
Title	Director
Phone	(84)-4-3850-5000 (Ext. 6114)
Fax	(84)-4-3850 5120
E-mail	trantx@state.gov

Part II. Project Description

Instructions:

The recruitment effort for your project request can be most effective if:

1. Careful attention is given to the Project Description, Project Purpose, Project Impact and Project Potential to ensure adequate detail in describing the scope of work.

2. Adequate lead-time is given for recruitment of specialists who best fit the program request. Please allow a minimum lead-time (before the requested start date) of 2 months (for candidates already on the roster) / 3 or more months for non-roster candidates/ when no specific person is named.

3. Flexibility in the time frame of the proposed project is allowed in order to accommodate the various schedules of potential Fulbright Specialists candidates.

See a selection of Fulbright Specialists stories about past grants on the CIES Web site at www.cies.org/specialists/stories and the Specialist Newsletter at www.cies.org/specialists/download/ssNL.pdf.

1. Give a brief title to your project

2. Please select the Discipline/Subdiscipline requested for this project
For more information, please refer to: http://www.cies.org/specialists/Joining_The_Roster/Eligible_Disciplines.htm

3. List any other fields of interest if this is an interdisciplinary request.

4. Type(s) of activity requested
Research is not funded via the Fulbright Specialists Program.

Choose as many as are applicable.

- ☐ Presenting lectures at graduate and undergraduate levels.
- ☐ Participating in or leading seminars or workshops at overseas academic institutions.
- ☐ Conducting needs assessments, surveys, institutional or programmatic research.
- ☐ Taking part in specialized academic programs.
- ☐ Consulting with administrators and/or instructors of post-secondary institutions on faculty development.
- ☐ Developing academic curricula or educational materials.
- ☐ Assessing academic curricula or educational materials.
- ☐ Conducting teacher-training programs at the tertiary level.

5. Project description
In order to provide the best possible matches of specialists with program requests, please be very specific as to the type and scope of work that the specialist would engage in.

The type and scope of work that the specialist would engage in should include what specific activities the specialist would be doing, the extent and level of the activities, and who the activities would benefit.

Refer the link: http://iie-fsp.studioabroad.com/index.cfm?FuseAction=PublicDocuments.View&File_ID=12 for examples of project activities. **(4000 characters max)**

6. Project purpose
Describe the program objectives and provide background on the issues and institutions involved.

The project objectives and background on the issues and the institutions involved should include what the goals of the project are and why the project is necessary and important.

Refer the link: http://iie-fsp.studioabroad.com/index.cfm?FuseAction=PublicDocuments.View&File_ID=13 for examples. **(4000 characters max)**

7. Project impact on host institution
Please comment on the project's potential impact on the host institution.

The program aims to support projects that will have a broad and lasting impact on the host institution i.e., curriculum development versus delivering a single lecture.

The potential impact on the host institution should include anticipated project outcomes such as an increased expertise at the host institution that had been unavailable or of a lesser quality, a new source of continued expertise for the host institution via the specialist, stimulation of networking among local institutions on a significant topic or issue, an upgraded curriculum, increased strategic thinking and planning at the institution, etc. **(4000 characters max)**

8. Potential for institutional linkages
Please describe project's potential for developing linkages between the host institution and the grantee's home institution.

The program aims to support projects that will have the potential for institutional linkages such as plans to expand and build on the initial project; new projects between the institutions; related endeavors such as the mutual exchange of students and faculty; future collaboration on curriculum, publications, etc., between these and/or other faculty at these institutions, etc. **(4000 characters max)**

Part III. Project Length
Instructions:
Refer the link: http://iie-fsp.studioabroad.com/index.cfm?FuseAction=PublicDocuments.View&File_ID=14 to read Basic Project Guidelines
1. Is the proposed project a single visit or a serial grant (multiple visits)? (Please Indicate "single visit" or "serial grant")
2. How many visits are you requesting?
3. Visit 1: Preferred Arrival Date Please enter the preferred arrival date for the first (or only) visit using the format mm/dd/yyyy. If requesting only one visit, omit the questions related to visits 2 and 3.
4. Visit 1: Length of Visit Please enter the number of days, including travel days, required for the first visit. Each visit must be between 14-42 days, including weekends, holidays and travel days. If requesting only one visit, omit the questions related to visits 2 and 3.
5. Visit 2: Preferred Arrival Date Please enter the preferred arrival date for the second visit using the format mm/dd/yyyy. If requesting only one visit, omit this question and other questions related to visits 2 and 3.
6. Visit 2: Length of Visit Please enter the number of days, including travel days, required for the second visit. Each visit must be between 14-42 days, including weekends, holidays and travel days. If requesting only one visit, omit this question and the other questions related to visits 2 and 3.
7. Visit 3: Preferred Arrival Date Please enter the preferred arrival date for the third visit using the format mm/dd/yyyy. If requesting only one or two visits, omit the questions related to visit 3.
8. Visit 3: Length of Visit Please enter the number of days, including travel days, required for the third visit. Each visit must be between 14-42 days, including weekends, holidays and travel days. If requesting only one or two visits, omit this question.
9. Total Preferred Grant Length Please indicate the total number of days requested for **all** visits.

10. Flexibility of Time Frame
Providing flexibility in the time frame of the requested project may result in a broader pool of candidates from which to choose. Please describe the extent, in days or months, of the host institution's flexibility.

11. If you are requesting a serial project, please explain the necessity for multiple visits.
A strong justification must be given for a serial project in order to justify the increased costs for more than one visit. Omit this question if you are not requesting a serial project. Justification is needed to send the same specialist on multiple exchange visits because an important program goal is to increase the participation of U.S. scholars and professionals in the Fulbright Program. The subsequent serial visits must build on the initial project, not repeat the same work, such as teaching the same course.

Part IV. Specialist Qualifications

Instructions:

Please indicate the preferred qualifications of the specialist you are seeking.

1. Basic profile

Please choose one:

☐ Academic

☐ Professional

☐ Either

2. Minimum academic degree

3. Minimum years of teaching experience

4. Minimum academic rank

Please choose one:

☐ Adjunct Professor

☐ Assistant Professor

☐ Associate Professor

☐ Dean

☐ Professor

☐ Professor Emeritus

☐ University Professor

5. Language requirements/preference

6. Audience
One way of determining the level of grantee expertise needed for a program is to know with whom he/she will be working e.g. undergraduate students, faculty, etc. Please describe. **(4000 characters max)**

Part V. Requesting a Specific Candidate

Instructions:

FSB policy allows Commissions and Embassies to include in a program proposal or in a special submission the names of candidates in whom an institution is particularly interested.

Foreign institutions may invite such candidates to apply with the understanding that the invitation does not constitute a commitment or a preference in final consideration.
The discipline peer review committee and FSB must approve candidates before they are eligible for projects within the Fulbright Specialists Program.

Commissions, embassies and host academic institutions should encourage candidates who are not yet on the Fulbright Specialists Roster to apply via the CIES Web site: www.cies.org.specialists

It is strongly encouraged that candidates submit an application at the same time as, if not before, the project request is submitted to ECA/A/E.

Note: The requested individual must be a U.S. citizen to apply and reside in the United States at the time the grant is approved.

Non-Roster Candidate Name Request (a non-Roster name request should be approved for the Roster before he or she is proposed for a project.) Please provide as many contact details as possible so that CIES can contact this person to ascertain interest and availability in being considered for this grant opportunity.

1. Candidates of Interest from the Roster
If you have looked at the Fulbright Specialists Roster and have found one or more specialists whom you wish to request for this project, **please enter their names below.** While CIES cannot guarantee that a specific individual will be available for this project, we will take your request into consideration and will do everything possible to find the right match for your project, either your named request or someone with similar expertise. If there is any information in addition to that provided in Questionnaire IV, that you would like us to know on the type of specialist required for your project, please include that information here. **(4000 characters max)**

2. Is this a request for a specific candidate?

3. Is the specific individual already on the FSP Roster?
If no, please refer the link:
http://iie-fsp.studioabroad.com/index.cfm?FuseAction=PublicDocuments.View&File_ID=15 for more information on requesting individuals from off the FSP Roster.

4. If yes, did you find the individual solely by using the Roster?
Omit this question if you are not requesting a specific individual.

5. Name of specific candidate requested

6. Title of candidate

7. Institution of candidate
If the candidate's institution is not listed here, please indicate the institution in the following question.

8. Other Institution of candidate
If the candidate's institution was not on the list in the previous question, please enter the name of that institution below.

9. E-mail address of candidate

10. Phone number of candidate

11. In the space below, provide justification for requesting this candidate. (4000 characters max)

12. Prior contact with candidate
Has the commission/embassy/host institution had prior contact with the requested candidate about this project? If so, please describe the results of those contacts in the space provided for your explanation to your "yes" answer. **(4000 characters max)**

Part VI. Cost Share Commitment

Instructions:

Costs for the Fulbright Specialist Program will be shared by the Office of Academic Exchange Programs (ECA/A/E) and the host institution. Prior to completing this form, please read **"Cost Share Commitment"** which outlines the cost sharing requirements of this project request. **"Cost Share Commitment"** is located under **How To Guides** in the lefthand column of your application home page.

The program requires cost sharing for lodging, meals, and local travel on the part of the host institution (or Fulbright Commission or post, if they choose) in order to indicate commitment on the part of the host institution for the success of the project.

We do not allow the specialists to pay these costs in lieu of the host institution (even though some offer to pay) as some scholars may be more able to afford these costs than others and therefore could possess an advantage.

The amount of cost share is at the discretion of the host institution, as approved by the Commission or post, as being reasonable accommodation for visiting foreign faculty.

Cost share does not have to be at the U.S. government per diem rate. ECA/A/E pays for the specialist's international travel and an honorarium.

The program requests a U.S. dollar value for the cost share in order to collect statistical information on overall cost share funds that support the Fulbright Program.

1. Housing Contact: Name of person responsible for housing arrangements

2. Housing Contact: Professional title of person responsible for housing

3. Housing Contact: Email address of person responsible for housing

4. Housing Contact: Phone number of person responsible for housing

5. Describe housing arrangements
Describe the lodging arrangements that have been made for the Specialist. Lodging for the duration of the stay should be arranged ahead of arrival. If in-kind coverage of cost share, please describe. If monies will be paid directly to the grantee, please indicate the amount in the following question. **(4000 characters max)**

6. Estimated U.S. dollar amount for housing

7. Who agrees to cover the cost share attributable to housing?

Please choose one:

☐ Host Institution

☐ U.S. Embassy

☐ Commission

8. Housing Availability: Enter start date using format mm/dd/yyyy.

9. Housing Availability: Enter end date using format mm/dd/yyyy.

10. Describe meal arrangements
Describe arrangements for coverage of meals. If providing in-kind coverage of cost share, please describe. If monies will be paid directly to the grantee, please indicate the amount in the following question. **(4000 characters max)**

11. Estimated U.S. dollar amount for meals

12. Who agrees to cover the cost share attributable to meals?

Please choose one:

☐ Host Institution

☐ U.S. Embassy

☐ Commission

13. Describe in-country travel arrangements
Describe arrangements for coverage of in-country travel. If in-kind coverage of cost share, please describe. If monies will be paid directly to the grantee, please indicate the amount in the following question. **(4000 characters max)**

14. Estimated U.S. dollar amount for in-country travel

15. Who agrees to cover the cost share attributable to in-country travel?

Please choose one:

☐ Host Institution

☐ U.S. Embassy

☐ Commission

16. Describe arrival and airport pick-up arrangements
Describe arrangements for the Specialist's arrival and pickup from the airport. Pease include the name of the person meeting the Specialist. Please also note that travel arrangements for the Specialist's return to the airport when departing the country are also the responsibility of the host institution, U.S. Embassy, or Fulbright Commission. **(4000 characters max)**

17. Special notes and instructions to Specialist
Please provide any special notes or instructions to the Senior Specialist regarding in-country details that would be helpful in preparing for his/her arrival. **(4000 characters max)**