

Yale-China Association
Chia Family Foundation Health Fellowship Program
2019-2020 Application (Due on Friday October 12, 2018)

Section 1 : Applicant Information

Applicant's Full Name: (Last, First)		Name in Chinese Characters	Date of Birth (M/D/Y)	Place of Birth	Male <input type="checkbox"/> Female <input type="checkbox"/>
Institution			Position and Department		
Mailing Address: (street, city, province, zip)					
Home address (street, city, province, zip)					
Work Address (street, city, province, zip)					
Work Phone		Home Phone		Mobile	
Fax		Email		Alternate Email	
Please list previous visa application to the U.S., if any					
Type of visa		Date of application		Were you granted the visa?	
Dates, locations, and purposes of previous visits to the U.S., if any					
Dates, locations, and purposes of previous visits to countries other than the U.S., if any					
How did you hear about the Chia Fellowship? *Please check all that apply					
<input type="checkbox"/> Announcement posted at my institution		<input type="checkbox"/> Website/Internet		<input type="checkbox"/> From a colleague or supervisor	
<input type="checkbox"/> From former Chia Fellows		<input type="checkbox"/> Other (please explain)			
*This information will not have a bearing on your application, but will help us learn how to better advertise the fellowship.					
Have you ever applied for the Chia Fellowship before? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, what year(s) did you apply? _____					
Have you taken any English language tests in the past 5 years? <input type="checkbox"/> Yes (Test: Score:) <input type="checkbox"/> No					
If you took more than one test, please list additional tests and scores: Test: Score: Test: Score:					

Professional schools or universities attended since high school (please attach copies of all diplomas received)

Name of School	Period Attended	Degree Attained and Date Confirmed	Focus of Study (or major)

Section 2 : References

List two individuals who can address your ability to carry out your proposed project. Please give the names, positions, and contact information below:

Name	Name
Title	Title



Institution/affiliation			Institution/affiliation		
Phone	Fax	Email	Phone	Fax	Email

Section 3 : Proposed Project. Please attach the project proposal as a separate document.

Please write a project proposal of 2-3 pages including:

- A background description of the community health or public health problem you have identified and its significance. Projects based in rural Yunnan will be given priority. Health projects should be concerned with improving health outcomes of underserved and vulnerable populations in resource-limited communities, through strengthening health service delivery and health system quality, improving health equity, and addressing emerging health needs in chronic diseases, mental health, pediatrics, geriatrics, women's health, and environmental health.
- What specific questions do you hope to answer through your research or what goals do you hope to achieve through your project?
- What do you hope to learn at Yale that will help you find solutions to the problem or answers to your questions? How will you apply these solutions when you return to China?
- How will you ensure that you can complete the project within two years upon return to China? Does your department provide time to conduct research? If not, how will you manage your research and work obligations?
- How do you think being selected for the Chia Fellowship will impact your career in the short and long term?

Section 4 : Additional required material and submission of the application

Please attach complete curriculum vitae (including education, work experience, research or other professional projects, publications, activities, professional affiliations, and any English language test scores) with the application form.

Applicants must submit copies of all diplomas for degrees received after high school (for verification of educational degrees).

Applicants must submit a signed letter of funding support from their home institution indicating full funding support of \$6,000 for their research project. Applicants without support of funding for their project from their home institution will not be eligible to apply.

Applications are due on Friday, October 12, 2018 and must be sent to both of the following two addresses. Please submit your application to Ms. GUO Haiyun at the Kunming Medical University International Exchange and Cooperation Office and to the Yale-China Association (via email, contact email addresses are below). You must satisfy institutional eligibility to apply. Please contact the international office if you are unsure of your eligibility.

Ms. Guo Haiyun

Director, International Exchange and Cooperation Office
Kunming Medical University
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Kunming, Yunnan, 650500
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Yale-China Association

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