

# SASLI Half/Full Fee Remission Instructions

## Eligibility

Any student who has submitted a complete SASLI application is eligible to apply for a SASLI Half/Full Fee Remission. For directions and more information about applying to SASLI, visit <http://sasli.wisc.edu/apply.html>.

## Instructions

- Application:** To be considered for a SASLI Half/Full Fee Remission, you must fill out the attached application. A handwritten application will not be accepted. Applications may be printed and signed or submitted with an electronic signature.
- Statement of Purpose:** You must submit a one-page maximum, typed statement of purpose that addresses your academic/other interest in the language you are proposing to study. More details about what should be included in your statement can be found at the end of the application form.
- Statement of Financial Need:** You must submit a one-page maximum, typed statement that addresses your financial need. This statement is separate from your statement of purpose. More details about what should be included in your statement can be found at the end of the application form.
- Letters of Recommendation:** Two letters of recommendation are required. These may be sent with your application or separately. The letters of recommendation may be sent via e-mail, but the subject matter for the e-mail must be clearly marked as, "SASLI Fee Remission Letter of Recommendation." Applications with pending letters of recommendation at the time of the deadline may not be reviewed.

## Notifications of awards

Notifications will be sent to all applicants via e-mail, both to those who receive an award and to those who do not. The review process does take time, so please be patient with our process. We expect to begin the notifications in late April 2017.

## Deadline: March 12, 2017

All application materials must be received in the SASLI office by March 12, 2017. **Submission by email is the preferred method.** Send your application materials to: [sasli@southasia.wisc.edu](mailto:sasli@southasia.wisc.edu).

If necessary, application materials can be sent to our office:

South Asia Summer Language Institute  
B488 Medical Sciences Center  
1300 University Avenue  
Madison, WI 53706

**Questions:** Call 608-261-1194 or e-mail: [sasli@southasia.wisc.edu](mailto:sasli@southasia.wisc.edu)

# SASLI Half/Full Fee Remission (continued)

## A. General Information

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Anticipated Student Status in summer 2017:  Undergraduate  Graduate  Other

## B. Post-High School Education (only 2 most recent)

Name of Institution: \_\_\_\_\_

Location: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Degree Earned: \_\_\_\_\_ GPA: \_\_\_\_\_

Name of Institution: \_\_\_\_\_

Location: \_\_\_\_\_

Dates Attended: \_\_\_\_\_

Course of Study: \_\_\_\_\_ Degree Earned: \_\_\_\_\_ GPA: \_\_\_\_\_

## C. Funding Information

Have you been offered any other funding for summer 2017?  Yes  No  Pending

If yes, amount: \$ \_\_\_\_\_

What other types of funding have you applied for to use during summer 2017?

\_\_\_\_\_

# SASLI Half/Full Fee Remission (continued)

## **D. Statement of Purpose**

Please include with this application a one-page statement of purpose that addresses the following:

- 1) A clear academic or other purpose for attending SASLI 2017.
- 2) How your attendance at SASLI 2017 will help you succeed in your area of study/career or other goals.
- 3) How you plan to continue your language study after SASLI 2017.

## **E. Statement of Financial Need**

Please include with this application a maximum one-page statement of financial need that addresses the following:

- 1) A summary of major sources of income for academic study and the financial support needed to participate in SASLI 2017.
- 2) Other circumstances that demonstrate your need for support.

I certify that all the information I have provided on this application is true, correct, and complete to the best of my knowledge.

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