

**COLLEGIUM PHAENOMENOLOGICUM**

**CITTÀ DI CASTELLO, UMBRIA, ITALY**

APPLICATION FOR ADMISSION (Application deadline: February 15, 2022)

All applicants should email their applications in an electronic format directly to the Director at k-sweet@tamu.edu. Please write “Collegium 2022 Application” in the subject heading. If it is necessary to send hard copies of application materials, applicants from North America and Africa should send them by mail to the Director, applicants from Latin America to the Latin America Correspondent, applicants from Europe to the Europe Correspondent, applicants from Australia to the Australia Correspondent, and applicants from Asia to the Asia Correspondent. Addresses follow at the end of this application form.

Name: \_\_\_\_\_  
Last First Middle

Present Address:

\_\_\_\_\_  
Number and Street

\_\_\_\_\_  
City State Zip Code Country

Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Summer Telephone (if different): \_\_\_\_\_ Birth Date: \_\_\_\_\_

Citizenship: \_\_\_\_\_ Legal Residence: \_\_\_\_\_

*Please note: Participants are responsible for having the appropriate passport/visa(s) for traveling to Europe. Note that visa applications may take some time.*

In case of emergency, notify: Name(s):

\_\_\_\_\_

Relationship to you: \_\_\_\_\_

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

\_\_\_\_\_

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

Major field of study: \_\_\_\_\_

List, chronologically, all colleges and universities attended and degrees obtained:

Institution:

Degree:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In addition to this application information, please also submit items 1-3 of A or B below:

A. If you are a college or university faculty member: 1) A current curriculum vitae. 2) A statement of purpose (please attach one-page statement to application). 3) One letter of recommendation from someone who knows your academic qualifications.

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Name of referee	Institution	Position
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B. If you are a graduate student: 1) A current curriculum vitae, including coursework and GPA. 2) A statement of purpose (please attach one to two-page statement to application). 3) Recommendations from two faculty members who know your academic qualifications.

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Name of referee	Institution	Position
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Name of referee	Institution	Position
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Please ask your referee(s) to mail or email the letter(s) directly to the Director or the relevant correspondent. **INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.**

I hereby certify that the information on this application is complete and accurate:

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Applicant's signature	Date
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