

## Florence Writers Conference 2011 Admissions Application

Please note there are two applications involved. Both must be mailed in one package to:

Jen Green  
Study Abroad Advisor  
International Academic Programs  
Stony Brook University  
E5340 Frank Melville Jr. Memorial Library  
Stony Brook, NY 11794-3397

They should not be mailed to the Stony Brook Southampton MFA office.

**The Deadline for applications is October 1<sup>st</sup>, 2010.** Please take that into account when budgeting time to gather recommendations and transcripts.

Stony Brook Southampton MFA students do not need to get recommendations or transcripts, but all others applying to the program (credit and non-credit) will need them.

You do not need to fill out the Language Proficiency Form - All workshops are in English

If you have any questions, please feel free to call. I look forward to seeing your application.

Sincerely,

Christian McLean  
Conference Coordinator  
Stony Brook Southampton  
[Christian.mclean@stonybrook.edu](mailto:Christian.mclean@stonybrook.edu)  
631-632-5007

**Instructions**

- This Application Form is used for most Overseas Academic Programs sponsored by any State University of New York Campus.
- Check with the administering campus for any special instructions needed to complete this application (also see sections below)
- Complete this application form. If you are interested in more than one program, rank them in order of your preference. If the programs are administered by different SUNY schools, send a set of copies of all forms of each administering campus. All choices will be considered with equal prospect of acceptance. If you are accepted into several programs, you will be able to choose the one in which you wish to participate.
- Take your application to the Study Abroad Office at your home campus for signature.
- Keep a photocopy of your completed application (OAP 1) for your records.
- Submit the application and all supporting documents to the administering campus as each portion is completed.
- Send an official academic transcript from your current school and any other colleges where you have completed coursework to the Administering SUNY Campus. Federal laws prohibit the campus from obtaining this document: you must request it yourself.
- Note: It is recommended that you send in your materials well before the deadline. Check with the administering campus for the deadline. Late applications are sometimes considered on a space-available basis. If the deadline has passed, contact the administering campus for instructions.

**Checklist**

A complete Application includes all of the following:

- Complete Application Form (Form OAP 1, two pages)
- Study Statement (Form OAP 2, one page)
- Foreign Language Proficiency Form (Form OAP 3, one page)  
(not required for programs in which all courses are taught in English)
- Confidential Academic Reference Form #1 (Form OAP 4, one page)
- Confidential Academic Reference Form #2 (Form OAP 4, one page)
- Official Transcript(s) from all colleges / universities attended.

Special Campus Instructions:

*Please type or print with ballpoint pen.*

Application for:

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

Program Location Abroad: (You may choose to apply for several programs. All choices will be considered with equal prospect of success.)

1<sup>st</sup> Choice: \_\_\_\_\_  
University City Country Administering SUNY Campus

2<sup>nd</sup> Choice: \_\_\_\_\_  
University City Country Administering SUNY Campus

3<sup>rd</sup> Choice: \_\_\_\_\_  
University City Country Administering SUNY Campus

Study Period for which you are applying – check one:  
 Fall  Spring  Academic Year  Summer  Intersession Year: \_\_\_\_\_ Session (if applicable): \_\_\_\_\_

How did you learn about his program? \_\_\_\_\_

**Personal Information** (*Please notify us of any change of address or telephone number.*)

Birthdate: \_\_\_ / \_\_\_ / \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Sex (M/F): \_\_\_\_\_ Married? (Y/N) \_\_\_\_\_  
Mo Day Year City / State Country

Country of Citizenship: \_\_\_\_\_ Visa Status (if not a U.S. citizen): \_\_\_\_\_

Social Security # \_\_\_\_\_ Home Campus: \_\_\_\_\_

Local Address: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
Number, Street Apartment #

\_\_\_\_\_ E-mail: \_\_\_\_\_  
City State Zip Code

My local address can be used until the following date: \_\_\_ / \_\_\_ / \_\_\_\_\_ E-mail valid until: \_\_\_ / \_\_\_ / \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
Number, Street Apartment #

\_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_  
City County State Zip Code

**Academic Status**

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

Specialty within major field: \_\_\_\_\_ Academic Advisor: \_\_\_\_\_

Freshman  Sophomore  Junior  Senior  Master  Doctorate GPA (major, estimated): \_\_\_\_\_ GPA (cumulative): \_\_\_\_\_

Semester Credits Completed To Date: Undergraduate: \_\_\_\_\_ Graduate: \_\_\_\_\_

Semester Credits Currently Enrolled: Undergraduate: \_\_\_\_\_ Graduate: \_\_\_\_\_

Your Name \_\_\_\_\_

Program Location Abroad \_\_\_\_\_

Administering SUNY Campus \_\_\_\_\_

**Academic Background**

Colleges or Universities Attended :

Name	Dates (from –to)	Credits	Degrees	Honors
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

List language courses (except English) or other courses you have taken that have prepared you for this program:

Title	Credits	Grade	H.S. or College?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Contact Information (Please notify us of any change of address or telephone number.)**

Name and Address of Parent or Guardian (if under 21):

Name and Address of person to contact in case of emergency:

\_\_\_\_\_  
 Name Home Telephone (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
 Street Cell or Daytime Telephone (\_\_\_\_\_) \_\_\_\_\_

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

E-mail: \_\_\_\_\_

\_\_\_\_\_  
 Name Home Telephone (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
 Street Cell or Daytime Telephone (\_\_\_\_\_) \_\_\_\_\_

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

E-mail: \_\_\_\_\_

**Miscellaneous**

Please describe you plans for financing your participation in an overseas study program by indicating the amount of money you expect to receive from each source.

Financial Aid: \_\_\_\_\_ Scholarships: \_\_\_\_\_ Grants: \_\_\_\_\_ Loans: \_\_\_\_\_ Parent /Guardian Assistance: \_\_\_\_\_ Saving: \_\_\_\_\_

Other Assistance Sources (please describe): \_\_\_\_\_

State briefly any additional information that may be useful in evaluating your candidacy, including any travel or residence in other countries or regions of the U.S. or anything else you wish to point out about yourself or your academic record:

\_\_\_\_\_  
 Student's Signature

\_\_\_\_\_  
 Date

Home Campus Study Abroad Office Signatures

I am aware that this student is applying to the SUNY study abroad program(s) listed on page 1 of form OAP 1:

Your Name (please print) \_\_\_\_\_ Title, Department \_\_\_\_\_

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

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Your Name

Program Location Abroad

Administering SUNY Campus

**To the Student**

Write a concise statement of your proposed program of study abroad and how it will be related to your present academic Program. Also describe the personal benefits you expect to receive from the program. Use the reverse side of this sheet and/or an additional page, if necessary. Sign your statement and submit it to your academic advisor for approval and signature. Then send it to the International Education Office of the Administering SUNY Campus.

**To the Advisor**

Please discuss with your advisee how this proposed program of study will complement his or her academic program. It is suggested that a copy of this signed form be retained in the student's advisement file.

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Name and Title of Academic Advisor

Advisor's Signature

Date

Your Name \_\_\_\_\_

Program Location Abroad \_\_\_\_\_

Administering SUNY Campus \_\_\_\_\_

Address of Administering SUNY Campus \_\_\_\_\_

**To the Student:** This form is for programs in which all or a portion of the coursework is taught in a language other than English. Please complete this portion of the form and sign. Ask your current professor or the person who has most recently taught you in a language course to complete the rest. Please check all appropriate boxes.

a) I will have completed the required foreign language coursework prior to the start of the program through:

Coursework OR  I have equivalent preparation (please explain): \_\_\_\_\_

b) While abroad,

I will be taking language courses at the level of:  beginner  intermediate  advanced

I will be taking courses in the host language designed for foreign students

I will be taking regular university courses taught in the host language

c) Estimate your proficiency in the language of greatest importance in the program (except English):

Language _____	Excellent	Good	Fair	Poor
Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listening Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I waive my right to access this reference completed by \_\_\_\_\_  Yes  No

Name of Reference

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To the Reference:** The student named above is applying for the designated State University of New York overseas academic program. We would appreciate your comment on the applicant's language abilities. Please check the boxes that most accurately describe your judgment. Please return this form to the International Education Office at above address.

	Excellent	Very Good	Good	Fair	Poor	No Ability
Reading in his/her field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understanding lectures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Composition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conversation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please refer to the boxes that the student has checked at the top of this form and rate the student's readiness for such coursework.

The applicant:  should have no difficulty on this program.

should be able to manage adequately after a short period of adjustment abroad.

should be able to manage adequately after some additional formal language training.

appears to require considerable training in the language before the necessary competence could be achieved.

Please indicate the experience with the student upon which your evaluation had been made:

Please add any comment you feel would aid in understanding the candidate's qualifications (you may use the back of this form, if necessary).

Your Name (please print) \_\_\_\_\_ Title, Department: \_\_\_\_\_

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

Your Name \_\_\_\_\_

Program Location Abroad \_\_\_\_\_

Administering SUNY Campus \_\_\_\_\_

Address of International Education Office of Administering SUNY Campus \_\_\_\_\_

**To the Student**

This academic reference should be given to a professor who knows you well and is able to judge your academic qualifications for study abroad. A letter of recommendation on letterhead is also acceptable.

As this letter is confidential, it should be sent directly to the Administering SUNY Campus by the person writing the letter. You must provide a stamped, addressed envelope for this purpose. You may submit this letter yourself if it has been placed in a sealed envelope and has been signed over the seal by the person writing the reference.

I waive my right to access this reference completed by \_\_\_\_\_  Yes  No

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**To the Reference:** *Please return this form to the International Education Office at above address.*

The student named above is applying for the designated State University of New York overseas academic program. We would appreciate your assessment of the applicant's attributes with which you are familiar. You may also attach a letter of recommendation.

How long and in what capacity have you known the student? \_\_\_\_\_

Academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Competence in major or specialization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic interest and motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Capacity for independent study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Non-Academic attributes

	Excellent	Very Good	Good	Fair	Poor	No Evaluation
Level of maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to adapt to new or unstructured circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence and self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate well to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please state frankly your opinion of this candidate's ability to suitably represent both their home campus and the USA in a study abroad program, weighing both strong and weak points. Please use the space below or the reverse side of this page. You may also add or attach a letter of recommendation.

Your Name (please print) \_\_\_\_\_ Title, Department: \_\_\_\_\_

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

Your Name \_\_\_\_\_

Program Location Abroad \_\_\_\_\_

Administering SUNY Campus \_\_\_\_\_

Address of International Education Office of Administering SUNY Campus \_\_\_\_\_

**To the Student**

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I waive my right to access this reference completed by \_\_\_\_\_  Yes  No

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Capacity for independent study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Resourcefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Non-Academic attributes

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Ability to adapt to new or unstructured circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence and self-esteem	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to relate well to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open-mindedness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please state frankly your opinion of this candidate's ability to suitably represent both their home campus and the USA in a study abroad program, weighing both strong and weak points. Please use the space below or the reverse side of this page. You may also add or attach a letter of recommendation.

Your Name (please print) \_\_\_\_\_ Title, Department: \_\_\_\_\_

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



# Florence Writers Conference 2011 Admissions Application January 2-12 2011

## I. Submission Guidelines

- All those applying for Contributor status must complete an application form and submit a writing sample of unpublished, original work of up to 15 pages. Longer submissions will not be reviewed.
- Manuscripts must be in 12-point font, double-spaced, with the writer's name on each page. Pages must be numbered. Please include a brief synopsis if the work is an excerpt from a longer piece.
- Submissions cannot be returned.
- Submissions must be postmarked by October 1, 2010.
- If applying as a subscriber, please submit a 150-word statement detailing your expectations of the program. Subscribers attend all readings, lectures, and social events, but do not participate in the actual workshops and cannot receive graduate credits.
- Please attach your writing sample to this part of the application.



## II. General Information (please type or print)

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

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

City/State/Zip: \_\_\_\_\_

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

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please check one:

I am applying as a workshop contributor and have attached my writing sample.

I am applying as a subscriber and have attached my brief statement of expectations.

## III. Enrollment Status

Non-credit

Graduate credit (eligible New York State Resident)

Graduate credit (eligible Out of State Resident, additional fee required)

Are you a matriculated Stony Brook University student?  Yes  No

Are you a matriculated Stony Brook University MFA In Writing student?  Yes  No

Are you a visiting student from another college or university?  Yes  No

(If yes, please tell us what school you currently attend: \_\_\_\_\_)

#### IV. Workshop Registration

Contributors Only: Please indicate your first choice by placing a “1” next to your selection. In case your workshop is unavailable, indicate an alternate by placing a “2” next to your second choice.

- Creative Nonfiction with Matthew Klam
- Novel with Ursula Hegi

#### V. Manuscript Information

Title and genre of manuscript accompanying this form:

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(Please attach a brief synopsis if manuscript is an excerpt from a longer piece).

#### VI. Housing Status

Shared (double occupancy) housing in student apartments is included in the conference fee.

**Optional Single Room Guarantee:** USD\$200 based on availability (non-refundable) (depending on enrollment, there is the possibility that some participants will be placed in singles without paying this fee, but this payment guarantees you will not be doubled.)

**Optional supplement for hotel accommodation** to be added to the apartment housing cost:

*Grand hotel Mediterraneo b&b* --- [www.hotelmediterraneo.com](http://www.hotelmediterraneo.com)

- Multiple occupancy room – USD \$490
- Single occupancy room – USD \$920

*Hotel River b&b* – [www.hotelriver.com](http://www.hotelriver.com)

- Multiple occupancy room – USD \$680
- Single occupancy room – USD \$1030

#### VII. Tuition and Fees

Credit, program cost, admin. fees, room and board – USD \$3009.50

Non-credit, program cost, admin. fees, room and board – USD \$2580.00

Out of State Graduate Credit please add: USD \$609 (subject to change)

#### VIII. Deposits, Payments and Refunds

- \$200 non-refundable administration fee is due upon acceptance.

IX. How did you learn about the Conference?

- Attended Before  
 Advertisement (Check one:  The Bomb,  Dan's Paper's,  East Hampton Star,  
 Independent,  Poets & Writers,  Sag Harbor Express,  Shaw Guides,  
 Southampton Press,  Writer's Chronicle,  
 Other \_\_\_\_\_)
- Email from Program  
 Web Search  
 Website (Check one:  MFA Website,  Writers Conference Website,  other  
website: \_\_\_\_\_)  
 Word of Mouth  
 Other: \_\_\_\_\_

XI. Application Checklist

Before signing and submitting this application, please check to see that you have the following:

- completed application  
 writing sample  
 brief statement of expectations (subscriber)

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

For More Information:  
Florence Writers Conference  
Stony Brook Southampton MFA  
239 Montauk Highway  
Southampton, New York 11968  
Phone: 631-632-5007  
southamptonwriters@notes.cc.sunysb.edu

(all checks are non-refundable)

Would you like to receive more information about the Stony Brook Southampton MFA in Writing and Literature?  Yes  No