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## Introduction to the National Council on U.S.-Arab Relations

The **National Council on U.S.-Arab Relations** is an educational, non-profit, non-governmental organization headquartered in Washington, D.C. The Council was established in 1983 as a 501(c) (3) charitable organization with tax-exempt status.

The Council's *vision* is a relationship between the United States and its Arab friends that rests on a solid, enduring foundation. Such a foundation would be characterized by strengthened and expanded strategic, economic, political, commercial, and defense cooperation. It would also reflect heightened contacts and exchanges of present and emerging leaders among Americans and Arabs alike.

The Council's *mission* is educational. It seeks to enhance American awareness and appreciation of the multi-faceted and innumerable benefits the United States has long derived from its relations with the Arab countries, the Middle East, and the Islamic world. It endeavors to do this through leadership development, people-to-people programs, academic seminars, an annual Arab-U.S. policymakers' conference, specialized publications, and the participation of American students and faculty in Arab world study abroad and Arabic language learning experiences. In pursuit of its mission, the Council serves as a U.S.-Arab relations programmatic, informational, and human resources clearinghouse. In so doing, it provides cutting edge information and insight to national, state, and local grassroots organizations, media, public policy research institutes, and select community civic, religious, business, and professional associations.

Since its inception, one of the National Council's flagship educational programs has been the **Joseph J. Malone Fellowship in Arab and Islamic Studies**. This program is separate from but closely aligned to the Council's Youth Leadership Development / Model Arab League Program. Priority consideration for admission into the Malone Fellow Program is extended to American university and secondary school professors and teachers that have previously organized student delegations to participate in the Model Arab League Program and who have served as faculty advisers for the Model Arab League Program.

**More information about the Model Arab League Program is available at:**  
[ncusar.org/modelarableague](http://ncusar.org/modelarableague)

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[ncusar.org](http://ncusar.org)



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## **Malone Fellowship Application Procedure**

*A completed Malone Fellowship Application will include the following items:*

- 1)** A CV that includes your personal and professional background, such as international travel and/or study, awards, professional development experiences, and examples of personal and professional leadership - this can be in paragraph or list form. Please be sure to include any professional or personal experiences you have had with Arab or Islamic studies, including visits to an Arab or Islamic country.
- 2)** A double-spaced essay (no more than 3-pages in length) on the topic:  
*U.S.-Arab Relations: Challenges for American Leaders*
- 3)** A description, with relevant details, of the number and kinds of public affairs outreach programs you have addressed in the last 10 years. Based on this past experience, describe how you will plan to share your experience with colleagues and the community. Indicate clearly what specific public outreach commitments you feel certain you can fulfill upon your return and any other efforts at speaking to local civic, business, religious, and community groups.
- 4)** The names of the two most widely read local newspapers in your community, along with contact information (fax number or e-mail address) for each publication.
- 5)** The following completed forms from this application (*either enter your information electronically and print the document before affixing the two required signatures OR print a blank copy of the document and fill-out by hand*):
  - a)** *Contact Coordinates* (Page 3)
  - b)** *Release of Liability, Terms and Conditions Agreement for All Participants* (Pages 4-5)
  - c)** *Medical Authorization and Insurance Verification* (Page 6)
  - d)** *Emergency Contact Information* (Page 7)

**COMPLETED MALONE FELLOWSHIP PROGRAM APPLICATIONS SHOULD BE MAILED OR COURIERED TO THE NATIONAL COUNCIL'S OFFICE AT:**

National Council on U.S.-Arab Relations  
ATTN: Malone Fellowship Program  
1730 M St. NW, Suite 503  
Washington, DC 20036

*If you have any questions please call the National Council on U.S.-Arab Relations at (202) 293-6466.*



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## **Joseph J. Malone Fellowship in Arab and Islamic Studies Program Application**

*Since 1984, the National Council on U.S.-Arab Relations has provided selected American professionals in academia, government, and business unparalleled educational experiences in the Arab world through the Joseph J. Malone Fellowship in Arab and Islamic Studies. The Malone Fellowship is not endowed. It is sometimes partially subsidized by the National Council's general budget. When this is not the case, the program fee paid by Fellows covers the Council's administrative overhead costs and all or most of the true economic expenses incurred by the program. Whether in the form of in-kind air transportation, accommodations, or in-country meals and local travel costs, the Council receives no monetary outlays for this program from either the United States or any host government. The Fellowship projects its participants into the middle of a particular Arab-U.S. relationship. It provides first-hand exposure to the region's considerable cultural, economic, political, and social diversity pursuant to increased knowledge and understanding. The overriding goal of the Fellowship beyond furthering one's education is to enable Fellows to share their experiences with as many and diverse a range of local public affairs, civic, media, and professional educational associations as possible.*

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### **Contact Coordinates**

NAME: \_\_\_\_\_

PROFESSIONAL TITLE OR RANK: \_\_\_\_\_

EMPLOYER or AFFILIATION: \_\_\_\_\_

PERMANENT (HOME) ADDRESS: \_\_\_\_\_

WORK ADDRESS: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ FAX: \_\_\_\_\_

MOBILE PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_



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**RELEASE OF LIABILITY, TERMS AND CONDITIONS AGREEMENT  
FOR ALL PARTICIPANTS IN THE  
JOSEPH J. MALONE FELLOWSHIP IN ARAB AND ISLAMIC STUDIES**

The following agreements are designed to protect all participants in the Joseph J. Malone Fellowship in Arab and Islamic Studies, representatives of the National Council on U.S.-Arab Relations (hereinafter, National Council or Council), the Program Coordinator, National Council employees, the agencies and individuals cooperating with the Council in conjunction with study visits. It is essential that all participants read, understand, and sign these forms to indicate their agreement and permission.

**RELEASE OF LIABILITY**

1. The National Council on U.S. - Arab Relations serves only to assist in making necessary air travel and land arrangements for participants and in no way represents or acts as an agent for transportation carriers, hotels, and other suppliers of services connected with the upcoming study visit. Travel and services are subject only to the terms and conditions under which such accommodations, services, and transportation are offered or provided by the suppliers and air carriers.
2. Participation in the National Council's study visits is entirely voluntary. In partial consideration of the National Council on U.S.-Arab Relation's sponsoring the program and permitting individuals to participate, the Council and its employees accept no responsibility or liability and are not liable for any injury, damage, loss, accident, delay or other irregularity which may be caused by the defect of any vehicle or the negligence or default of any company or person engaged in carrying out or performing any of the services provided. Neither is responsibility accepted for losses or expenses due to sickness, weather, strikes, violence, wars, or other causes. All services and accommodations are subject to the laws of the countries in which they are provided. Baggage, valuables, and other personal effects (inclusive of prescription and nonprescription medicines) are the sole responsibility of the owners at all times.
3. If any person on the study visit does not utilize part of the air transportation at any time for any reason, such person shall be responsible at her/his own additional expense for all substitute transportation required to complete the visit.
4. The National Council on U.S.-Arab Relations reserves the right to make cancellations, changes, or substitutions in cases of emergency, changed conditions, or in the interest of the group.
5. The National Council on U.S.-Arab Relations requires that all participants be covered by appropriate sickness and accident insurance and that they be financially responsible for all medical and/or health care expenses. The Council understands that payment for medical or other health care expenses customarily will have to be advanced by the participant with reimbursement sought later from the carrier.



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**TERMS AND CONDITIONS AGREEMENT**

I hereby state that, should I be selected, I intend to participate in the Joseph J. Malone Fellowship in Arab and Islamic Studies Program solely for the educational purposes of studying and experiencing contemporary Arab culture, society, and Arab-U.S. relations in general as well as with regard to the dynamics of the relationship between the United States and the Arab country/countries visited. I agree to conduct myself at all times during the trip in a manner respectful both of the aims and purposes of the program, and of the laws and customs of the countries to which we will travel. I agree to comply with the decisions and directives made on behalf of the delegation and/or in the interest of the program's success by the delegation's coordinator(s) and/or representative(s), and I understand that failure to fulfill these obligations may result in my being requested to return to the United States in advance of the delegation's scheduled return as well as be made personally responsible for obtaining and paying for whatever extra costs may be incurred in meeting the altered flight and accommodations requirements. If for any reason I elect to terminate my participation in the Malone Fellowship program voluntarily, I agree to forfeit my program fee and depart the host country immediately.

The undersigned has read the Release of Liability Waiver, Insurance Verification, Medical Authorization, and Terms and Conditions Statement and hereby agrees to abide and be bound by such Waiver, as well as the Terms and Conditions Statement, and to release and hold harmless the National Council on U.S.-Arab Relations from any liabilities incurred during any portion of the study visit.

\_\_\_\_\_  
**Name (Please Print)**

\_\_\_\_\_  
**Passport Number**

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Passport Place & Date of Issue**

\_\_\_\_\_  
**Date of Expiration**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**



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### **INSURANCE VERIFICATION**

I, \_\_\_\_\_, am insured under policy number \_\_\_\_\_  
with the \_\_\_\_\_ Company for sickness and accident insurance.

Date of Expiration: \_\_\_\_\_

In addition, I hereby assume responsibility for all medical expenses incurred by and on behalf of myself.

### **MEDICAL AUTHORIZATION**

In the event I am not able to give my consent, I the undersigned \_\_\_\_\_, hereby authorize the National Council on U.S.-Arab Relations representative to consent for me to any x ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care deemed necessary or advisable by a licensed physician during the period of the study visit.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of the National Council on US Arab Relations to give specific consent to the diagnosis, treatment or hospital care which in the best judgment of a licensed physician is deemed available.

\_\_\_\_\_  
**Name (Please Print)**

\_\_\_\_\_  
**Social Security Number**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

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

**Telephone #:** \_\_\_\_\_



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## EMERGENCY CONTACT INFORMATION

NAME(S) AND RELATIONSHIP: \_\_\_\_\_  
\_\_\_\_\_

OFFICE OR PROFESSIONAL PHONE: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

MOBILE PHONE: \_\_\_\_\_

DOCTOR'S NAME: \_\_\_\_\_

DOCTOR'S TELEPHONE: \_\_\_\_\_

Please any medical conditions the Council and hosts should be aware of:

Please list any prescription medications you are taking:

Please list any special instructions you may have in case of an emergency:

***Should you wish to fully assure privacy and confidentiality, this information may be provided in a signed, sealed envelope clearly marked with the program participant's name. The envelope will be carried by the group escorts and will only be opened in case of medical emergency.***



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## Optional Medical / Life Insurance

Participants in the Joseph J. Malone Fellowship in Arab and Islamic Studies Program often wish to purchase elective Medical and/or Life Insurance for the duration of their study visit. The National Council does not endorse any one company for this insurance product, but as a service to program participants provides this Web link to **Global Travel Shield** - <https://www.globaltravelshield.com/> - as one option for such an insurance plan. **Any program fee paid to the National Council on U.S.-Arab Relations for the Joseph J. Malone Fellowship in Arab and Islamic Studies Program will not cover any medical or life insurance for any part of any study visit.**

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