



APPLICATION FORM – Training of Trainers: Strengthening of English Language Programs

INSTRUCTIONS:

Please return the completed form to KhannaS@state.gov with a copy to RaswantV@state.gov
 If you have any questions, please contact Shweta Khanna at 011-2347-2401

DEADLINE: Monday, February 25, 2013

1. PERSONAL DATA

Full name	Nationality	Date of birth (month/day/year)	City of birth

2. CONTACT INFORMATION

Complete postal address with zip code	Office phone number (include area code and/or extension)	Cellular phone (include area code)	Home phone number	E-mail address	Alternate e-mail address

3. TEACHING EXPERIENCE (PLEASE SPECIFY NAME OF INSTITUTION AND STARTING DATE)

Date (from/to)	Position and institutional affiliation	Subjects	Level (elementary, secondary, college)	Your main responsibilities (both teaching and administrative)

4. EDUCATIONAL BACKGROUND (INCLUDE DATES, DEGREE, ACADEMIC INSTITUTION, AND AREA OF SPECIALIZATION)

Dates (from/to)	Degree/area of specialization	Academic institution and address

5. PUBLICATIONS OR ACADEMIC PRESENTATIONS (PROVIDE THE THREE MOST RECENT ONES):

- 1-
- 2-
- 3-

6. MEMBERSHIPS:

- 1-
- 2-

7. Who nominated you for this course?

8. Have you received a scholarship for any online program offered by RELO? If yes, please specify the course and the year you completed it.

9. STATEMENT OF PURPOSE:

Please state why you are interested in receiving a scholarship to participate in the online course *Training of Trainers: Strengthening of English Language Programs*. Indicate specifically (a) what impact your participation in this course would have on your institution/region, and (b) how you expect to put to good use, in the short or medium term, the knowledge acquired in this course. **(500 words maximum – any text longer than 500 words will not be read)**