

Games, Apps and Entertainment in STEM Education Application Form

Please Note: *The program is not open to U.S. citizens, Green Card holders, or past participants of U.S. government-funded programs.*

Participation Criteria					
Are you a resident of the Republic of Ireland or Northern Ireland?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Are you a U.S. citizen or Green Card holder?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you previously been on a U.S. Government-funded program?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	I understand that if accepted to this program, I must relinquish my passport for visa processing for two weeks prior to the program start date.		
<p>IMPORTANT: Program participants will travel to the United States on a visa. Those who have been arrested or convicted of a criminal offense must, on notification of acceptance to this program, report this fact to either their U.S. Embassy or Consulate.</p>					

Personal Information						
Full Name:				Sex:	Male <input type="checkbox"/>	Female <input type="checkbox"/>
	<i>Surname</i>	<i>First</i>	<i>Middle Name</i>			
	<i>Exactly as on passport</i>					
Date of Birth:			Place of Birth:			
	<i>Month(written in full)/day & year</i>		<i>Town/city and country</i>			
Nationality:						
	<i>Current/previous and/or dual nationality – (In case of latter, which passport will be used for your travel on this program?)</i>					
Passport Number:			Place of Issue:			
Date of Issue:			Date of Expiration:			
	<i>Month (written in full)/day & year</i>		<i>Month (written in full)/day & year</i>			
Home or Office Address:						
	<i>Street Address</i>			<i>Apartment/Unit #</i>		
	<i>City</i>	<i>Postal Code</i>	<i>County</i>	<i>Country</i>		
Phone:	()	E-mail Address:				
Fax	()	Mobile:	()			

Work History	
Present Position:	
	<i>exact title, organization & start date of current position</i>
Brief Description of Job Responsibilities:	
Previous Professional Experience:	
	<i>Dates followed by positions – most recent first</i>

Academic and Professional Training

University:		Address:					
From:		To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
University:		Address:					
From:		To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
Other:		Address:					
From:		To:	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
Publications or Professional Memberships:							
Interests (Professional and Personal):							

Medical, Physical and Dietary Considerations

(Please include allergies or food restrictions, including vegetarianism; existing health conditions, any physical conditions to be considered with regard to access to transportation, accommodation etc.)

Previous US Travel

Previous U.S. Travel	
	<i>Purpose of travel (vacation/business), dates and places visited – most recent first</i>

Why would you make a good participant on this program?

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Brief Professional Biography

This biography of your professional background will be used as a briefing document for meeting hosts, seminar faculty, special guests, and your fellow participants. Please use complete sentences and paragraphs, avoid acronyms or terms that will be unfamiliar to those outside your organization, field, or country. Describe your current role and expand about your past relevant experience in the field.

Please keep the bio between 150-250 words.

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Please email this form to:

dublingrants@state.gov

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