



# FULBRIGHT PROGRAM

## APPLICATION FOR STUDY IN THE UNITED STATES

\*\*\*READ ALL INSTRUCTIONS AND INFORMATION CAREFULLY BEFORE COMPLETING APPLICATION\*\*\*

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### INSTRUCTIONS

Upon receipt of your application from the Fulbright Program Office in your country of citizenship, The Institute of International Education (IIE) will make every effort to secure admission for you at a suitable educational institution and, if applicable, to arrange any necessary scholarship assistance. **YOU SHOULD NOT MAIL THIS FORM DIRECTLY TO ANY UNIVERSITY IN THE UNITED STATES.**

1. All forms in this application are to be completed in English and typewritten in black ink or printed from a computer.
2. Each page of the following application carries its own instructions that should be read carefully before proceeding.
3. Question must be answered completely and carefully. Please make every effort to limit your responses to the space provided.
4. Completed applications should be returned to Fulbright Program Office in your country of citizenship as soon as possible. Before you begin this application, you should make sure that you are aware of all deadline dates and requirements as these may vary from country to country.
5. Incomplete applications will not be considered.
6. Do not mention the names of any U.S. universities you wish to attend in this application. The University Preference Sheet is included for that purpose.

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### APPLICATION

**Please note:**

- 1) Moving from field to field: Use the **tab key** to move from field to field.
- 2) Text boxes: Do **not** exceed the space available.

*A complete application consists of the following components*

#### I. GRANT COVER SHEET

#### II. APPLICATION

In the first six pages you will state biographical information, study objectives, curriculum vitae, and other information.

Often specific instructions for completing a question or item will be provided in the application. Please read all instructions carefully. In addition, please review the following important information.

**Item 1—Name:** It is very important that you list your name exactly as it appears (or will appear) on your passport.

**Item 14—Institutions Attended:** Please list all post-secondary institutions attended in reverse order (putting the most recently attended first). List all post-secondary institutions attended even those from which you did not achieve a degree. Check the instructions from your Fulbright Program Office to find out if they want you to include secondary (high school) institutions as well.

**Item 28—Study/Research Objective:** The study/research objective description that you provide is an essential and highly important part of your application. You should take great care to write a clear and very detailed description of the program you want to pursue. Clearly identify the area(s) within your field of study in which you want to specialize or concentrate. If there is specific research that you want to accomplish, please describe.

**Item 29—Personal Statement:** The personal statement is a narrative statement in which you can include information about your education, practical experience, special interests, career plans, and your purpose in applying for study in the U.S.

**Item 30—Additional Information:** This is not a required page; however, please check with the Fulbright Program Office in your country of citizenship to find out if there is specific information that is required for you to provide on this page. If your Fulbright Program Office does not require specific information, please feel free to use this page to give additional information about yourself. If you intend to pursue a professional degree, e.g. business or law, it is recommended that if you attach a professional resume. If you intend to pursue a theoretical, academic degree, a complete curriculum vitae is useful.

**Page 7—Personal Information:** The information provided on this form will be used by the Fulbright Program Office and IIE for internal purposes only.

**Item 32 — National Identification #:** This item is not required. However, if your country or state assigns a personal identification number, please enter it here.

**Page 8—Personal Financial Information:** Since the Fulbright grant that may be awarded to you might only cover a portion of your expenses, you may need to provide funds from your own or other sources. Therefore, please complete this form—when it is required—as completely and accurately as possible based on information that you have at the time of application. If you should have a major change in your financial resources while your grant is pending, you should immediately inform the Fulbright Program Office in your home country.

**Page 9—University Preference:** Please note carefully, it is **not** an expectation that you will have U.S. university preferences. However, if you do, please be specific. Do not just list the name of a university. Provide the name of the department and the specific program within that department in which you are interested. If you have been in contact or correspondence with a faculty member, please provide the name and contact information for that individual.

You can also use this form to provide other information that is important to you, e.g. climate, large vs. small institution, urban vs. rural location, etc.

If you have applied to a U.S. university within the past three years, please list the programs and the results. If you have letters of admission, letters of invitation, or other correspondence from a school, especially a preferred program, please forward a copy (not the original) of this correspondence to the Fulbright Program Office in your country of citizenship.

**Page 10—Student Record Card:** Complete the top section only. The remaining section is for office use.

### III. SUPPLEMENTAL FORMS

1. **Letter of Reference/Recommendation:** You must have three letters of reference (or recommendation) submitted on your behalf. Letters of reference are extremely important. All letters of reference should be written by teachers under whom you have studied or pursued research or by someone who has supervised you in work related to your proposed field of study. Letters of reference should not be written by persons related to you either by blood or marriage or by personal friends. At least one academic and one professional or work related letter should be included among the letters. The letters should be written in English if possible. If they are not, an original English translation must be provided.

### IV. SUPPORTING DOCUMENTATION

#### 1. Transcripts

Applicants must attach official, complete and certified academic documents covering the entire period of study at universities and other post-secondary institutions. Documents must be accompanied by complete official English translations. These documents must consist of:

- One certified, official record (transcript) from each university or post-secondary institution you attended, even those schools from which you did not receive a degree or diploma. These transcripts should list the subjects you studied and the grades you received during each year of your enrollment. Include all post-secondary institutions you have attended, even those from which you did not receive a degree or diploma. Official transcripts must be submitted in sealed envelopes.
- Certified, official evidence of each post-secondary or university degree, diploma or certificate awarded to you should be included as part of the completed application.
- Five copies of original transcripts for any coursework (graduate or undergraduate) done in the United States. Please contact your Commission, U.S. Embassy or Committee to receive a copy of the *Transcript Release Form*. IIE will request transcripts for you from U.S. institutions you have previously attended.

**NOTE:** Individual Fulbright Commissions, U.S. Embassies, or Selection Committees may require that you complete additional forms as part of your Fulbright application. Check with the Fulbright Program Office in your country of citizenship.

### V. OTHER IMPORTANT INFORMATION

1. **Duration of Grants:** Fulbright grants and other fellowships, assistantships, scholarships and educational grants are generally awarded for one nine to twelve month academic year beginning in August or September. Candidates appointed to certain types of Fulbright grants may be required to arrive during the summer for an introductory course or intensive English program prior to the academic year. In some cases, arrangements may be made for an extension of the period of grant beyond the first academic year. Candidates should not assume, however, that awards are automatically renewable.
2. **Duration of Degrees:** The length of your degree program may exceed the available funding and sponsorship limits of your Fulbright grant. The requirements for completing academic work toward a degree vary depending upon the degree desired, the candidate's academic background and the regulations of the individual U.S. institution to which the candidate is admitted. It is usually not possible to obtain a degree in one academic year. Although the minimum time required for a Master's degree is one academic year, a student should expect to spend from at least one summer session to an additional academic year to complete the academic requirements. For the Doctoral degree, at least two to three academic years are required beyond the master's degree. However, many doctoral students find four or five years necessary, and in some cases even longer.
3. **Change of Plans:** You should promptly inform your Fulbright Program Office of any change in your academic status or future plans after your application has been submitted.



# FULBRIGHT PROGRAM

## APPLICATION FOR STUDY IN THE UNITED STATES

(Please read instructions carefully. All sections should be completed in English and be typewritten.)

### GENERAL INFORMATION

1. NAME (As it appears or will appear on your passport)

Mr.   
Ms.

Family

First

Middle

2. NAME ON PREVIOUS ACADEMIC RECORDS: (If different from above)

Do not complete shaded area. For IIE use only.

3. CURRENT MAILING ADDRESS: <b>Institute of International Education</b> <b>C/O</b> <b>809 United Nations Plaza</b> <b>New York, NY 10017-3580</b> <b>Tel: 212 984-</b> <b>Fax: 212 984-5395</b> <b>E-mail: @iie.org</b>	4. PERMANENT MAILING ADDRESS: Street: City: State/Province: Postal Code: Country:	
	5. DATE OF BIRTH: (Month-Day-Year)	6. GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female
7. BIRTHPLACE: (City, State/Province, Country)	10 DO YOU NOW HAVE, OR HAVE YOU EVER HELD: U.S. CITIZENSHIP? <input type="checkbox"/> Yes <input type="checkbox"/> No DUAL CITIZENSHIP? <input type="checkbox"/> Yes <input type="checkbox"/> No U.S. PERMANENT RESIDENCY? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. COUNTRY OF CITIZENSHIP		
9. COUNTRY OF RESIDENCE:		

### STUDY PLANS

11. DEGREE OBJECTIVE:  Bachelor's  Master's  Doctorate  Non-Degree  Visiting Student Researcher

12. WHAT IS YOUR PROPOSED MAJOR FIELD OF STUDY? BRIEFLY DESCRIBE THE SPECIFIC AREA OF YOUR FIELD IN WHICH YOU PLAN TO SPECIALIZE?

13. FUTURE PLANS: (Describe the career you plan to pursue after completion of study or research in the U.S. (e.g., teaching, government, business, industry or any plans you might have for continued study or research in your home country). Also indicate if you will be returning to former employment, or if you have been promised a position in your home country after completing your U.S. training).

**EDUCATION**

**14. LIST EDUCATIONAL INSTITUTIONS ATTENDED IN REVERSE CHRONOLOGICAL ORDER, INCLUDING ANY IN WHICH YOU MAY BE PRESENTLY ENROLLED:**

INSTITUTION AND LOCATION (List in reverse order and write name in full)	MAJOR FIELD OF STUDY	DATES (Month and Year)		ACTUAL NAME OF DEGREE OR DIPLOMA (Do not translate)	DATE RECEIVED OR EXPECTED
		From	To		

**15. LIST SCHOLARSHIPS OR FELLOWSHIPS HELD AT PRESENT OR IN THE PAST (Give source or sponsor, amount, where held, and duration.)**

**16. INDICATE ANY ACADEMIC HONORS OR PRIZES WHICH YOU HAVE RECEIVED, WITH TITLES AND DATES**

**17. LIST ANY BOOKS, ARTICLES OR THESES PUBLISHED BY YOU, ESPECIALLY IN YOUR PROPOSED FIELD OF STUDY (Give title, place and date of publication)**

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**18. LIST PROFESSIONAL SOCIETIES, FRATERNITIES OR OTHER ORGANIZATIONS IN WHICH YOU NOW HOLD MEMBERSHIP OR IN WHICH YOU HAVE BEEN ACTIVE IN THE PAST (Indicate if you have held an elective office.)**

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**19. TEACHING EXPERIENCE: (Including any teaching positions you have held or currently hold.)**

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**20. RESEARCH: (Including any research you have completed or in which you are currently involved.)**

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**OCCUPATIONAL EXPERIENCE**

21. IDENTIFY YOUR CURRENT POSITION OR OCCUPATION. (Write the position title which best describes the activity in which you are currently involved.)

22. OCCUPATIONAL EXPERIENCE: (List positions held, beginning with the most recent employment, if any.)

NAME AND ADDRESS OF EMPLOYER	TITLE/TYPE OF WORK	DATES (Month and year)	
		From	To

23. KNOWLEDGE OF LANGUAGES: (Rate yourself Excellent, Good or Fair. Include all languages in which you have some competence.)

Mother Tongue \_\_\_\_\_

LANGUAGE	READING	WRITING	SPEAKING
English			

24. HOW MANY YEARS HAVE YOU STUDIED ENGLISH? \_\_\_\_\_

**EXAMINATION RESULTS**

25. EXAMINATION DATES AND TEST SCORES: (Date if taken or future date for taking exams (Month/Year))

Date	Score	Percentile	Date	Verbal Score	%	Quantitative Score	%	Analytical Score	%
TOEFL	_____	_____	GRE	_____	_____	_____	_____	_____	_____
TSE	_____	_____	General Exam	_____	_____	_____	_____	_____	_____
TWE	_____	_____	Date	Score	%	Subject Name			
GMAT	_____	_____							
Other	_____	_____							
Other Test Name			GRE	_____	_____	_____	_____	_____	_____
			Subject Exam	_____	_____	_____	_____	_____	_____

26 IF YOU HAVE TRAVELLED, LIVED, OR STUDIED IN ANY COUNTRY OTHER THAN YOUR OWN FOR MORE THAN A MONTH, INDICATE PLACES, DATES AND REASONS, (Education, research, business, vacation, etc.)

27 EMERGENCY CONTACT: NAME, ADDRESS AND TELEPHONE NUMBER OF INDIVIDUALS TO BE NOTIFIED IN CASE OF AN EMERGENCY:  
**IN YOUR HOME COUNTRY** **IN THE UNITED STATES**

NAME:

COUNTRY:

28.

### **STUDY RESEARCH OBJECTIVES**

Write a clear and detailed description of your study objectives and give your reasons for wanting to pursue them. Be specific about your major field and your specialized interests within this field. Describe the kind of program you expect to undertake, and explain how your study plan fits in with your previous training and your future objectives. This statement is an essential part of your application.. **Do not mention specific U.S. universities at which you would like to study.** NOTE: Please limit your response to the size of this text box.

NAME:

COUNTRY:

29.

### **PERSONAL STATEMENT**

This personal statement should be a narrative statement describing how you have achieved your current goals. It should not be a mere listing of facts. It should include information about your education, practical experience, special interests, and career plans. Describe any significant factors that have influenced your educational or professional development. Comment on the number of years of practical experience already completed in the field in which academic work will be done in the U.S. **Do not mention specific U.S. universities at which you would like to study.**

**NOTE: Please limit your response to the size of this text box of fifty lines of text.**

NAME:

COUNTRY:

30.

### ADDITIONAL INFORMATION

Please refer to the instructions from your Fulbright Program Office. It is possible that the Fulbright Program Office in your home country will have specific information that it would like you to include on this page. If the Program Office does not have specific requirements, then in this section you may want to attach a **professional resume** (usually required for professional degrees such as law and MBA's) or a complete **curriculum vitae** (sometimes required for students pursuing theoretical academic fields).

**NOTE: Please limit your response to the size of this text box of fifty lines of text.**



NAME: _____	COUNTRY: _____
<b>PERSONAL INFORMATION</b>	

**31. CURRENT MAILING ADDRESS**

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROVINCE: \_\_\_\_\_

POSTALCODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

TELEPHONE :# \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

**32. NATIONAL IDENTIFICATION # (if applicable):**

**33. MARITAL STATUS:**

**34. NUMBER OF DEPENDENTS: (spouse and children)**

**35. PLEASE DESCRIBE ANY PHYSICAL IMPAIRMENT YOU MAY HAVE. (This information is gathered for statistical purposes and to ensure appropriate placement. The Fulbright Program does not discriminate on the basis of race, color, religion, sex, national origin, and/or physical impairment.)**

**36. OTHER SCHOLARSHIPS:** Indicate if you are planning to apply for a fellowship, scholarship, assistantship or other educational grant or loan from another organization, government or educational institution. *(This information will not prejudice your application.)*

**37. REFERENCES:** List the names of persons from whom you have requested letters of reference.

NAME	POSITION	E-MAIL ADDRESS
I.		
II.		
III.		

**38. PROPOSED LENGTH OF STAY IN THE U.S**

**39. APPROXIMATE ARRIVAL DATE:**

**40. HOW DID YOU LEARN OF THIS FULBRIGHT COMPETITION? (Please indicate all that apply.)**

- |                                               |                                                      |                                            |
|-----------------------------------------------|------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Friend or relative   | <input type="checkbox"/> University (Specify)        | <input type="checkbox"/> Fulbright Website |
| <input type="checkbox"/> Previous Fulbrighter | <input type="checkbox"/> Newspaper (Specify)         | <input type="checkbox"/> Internet Link     |
| <input type="checkbox"/> Poster/Flyer         | <input type="checkbox"/> Other Publication (Specify) | <input type="checkbox"/> Other (Specify)   |



NAME OF APPLICANT: \_\_\_\_\_

COUNTRY: \_\_\_\_\_

**PERSONAL FINANCIAL INFORMATION FORM**

Because some scholarships provide only for part of the cost of an academic year in the United States, it is necessary to know what portion of the total expenses you and your family can pay from personal funds.

**INDICATE ALL FUNDS IN U.S. CURRENCY**

41	<p><b>FUNDS AVAILABLE FOR YOUR <u>FIRST YEAR</u> OF STUDY IN THE UNITED STATES (U.S. Dollars)</b></p> <p>(a) <u>Family Funds</u></p> <p>1. Father's occupation: _____ Mother's occupation: _____ Spouse's occupation: _____</p> <p>2. What is the total amount your family can provide for your FIRST YEAR of study in the U.S.? \$ _____</p> <p>b) <u>Your Own Funds</u></p> <p>What is the total amount you can provide from your own funds for your FIRST YEAR of study in the U.S.? \$ _____</p> <p>(c) <u>Other Funds</u></p> <p>Have you been awarded or do you expect to receive financial assistance from a university or institution in your home country in the U.S. or from any other sources? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, identify the source and indicate the estimated amount?</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align:left;">Source</th> <th style="text-align:center;">Estimated Amount</th> <th></th> </tr> </thead> <tbody> <tr> <td></td> <td style="text-align:center;">\$</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td></td> <td style="text-align:center;">\$</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td></td> <td style="text-align:center;">\$</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td></td> <td></td> <td style="text-align:right;"><b>Subtotal of C</b> \$ _____</td> </tr> <tr> <td></td> <td></td> <td style="text-align:right;"><b>GRAND TOTAL OF A, B, and C</b> \$ _____</td> </tr> </tbody> </table>	Source	Estimated Amount			\$	\$ _____		\$	\$ _____		\$	\$ _____			<b>Subtotal of C</b> \$ _____			<b>GRAND TOTAL OF A, B, and C</b> \$ _____
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	\$	\$ _____																	
	\$	\$ _____																	
	\$	\$ _____																	
		<b>Subtotal of C</b> \$ _____																	
		<b>GRAND TOTAL OF A, B, and C</b> \$ _____																	
42	<p><b>FUNDS AVAILABLE <u>AFTER YOUR FIRST YEAR</u> OF STUDY IN THE UNITED STATES</b></p> <p>(a) If you remain for more than a year would the same amount of money as indicated in "GRAND TOTAL" above be available for your SECOND YEAR of study in the U.S.? <span style="float:right;"><input type="checkbox"/>Yes <input type="checkbox"/>No</span></p> <p>(b) If "No" please specify the amount that will be available to you the SECOND YEAR:</p> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">1. Family Funds:</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td>2. Your Own Funds:</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td>3. Other Funds:</td> <td style="text-align:right;">\$ _____</td> </tr> <tr> <td><b>TOTAL of 1, 2 and 3</b></td> <td style="text-align:right;"><b>\$ _____</b></td> </tr> </table>	1. Family Funds:	\$ _____	2. Your Own Funds:	\$ _____	3. Other Funds:	\$ _____	<b>TOTAL of 1, 2 and 3</b>	<b>\$ _____</b>										
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2. Your Own Funds:	\$ _____																		
3. Other Funds:	\$ _____																		
<b>TOTAL of 1, 2 and 3</b>	<b>\$ _____</b>																		
43	<p><b>TRAVEL FUNDS (Do <u>not</u> include funds specified in Sections 41 and 42 above)</b> <span style="float:right;"><input type="checkbox"/>Yes <input type="checkbox"/>No</span></p> <p>(a) Can you pay for your round-trip travel to the U.S. if necessary?</p> <p>(b) Specify the amount you have available for round-trip travel: \$ _____</p>																		
44	<p><b>DEPENDENTS</b></p> <p>The Foreign Fulbright Student Program does not provide for dependents. THE FULBRIGHT PROGRAM CANNOT BE RESPONSIBLE IN ANY WAY FOR DEPENDENTS ACCOMPANYING YOU TO THE U.S. Should dependents accompany you, you will be responsible for providing travel, adequate insurance, and support for them.</p> <p>(a) List the relationships and ages of any persons who will require financial assistance from you during your stay in the U.S.:</p> <p>(b) Will these dependents accompany you to the U.S.? <span style="float:right;"><input type="checkbox"/>Yes <input type="checkbox"/>No</span></p> <p>If "Yes", state how you intend to provide for them during your year of study in the U.S.:</p>																		

NAME:	COUNTRY:
<b>UNIVERSITY PREFERENCES</b>	
<p>It is not a requirement nor is it expected for you to identify U.S. institutions at which you would like to study. However, if you do have preferences, please list in priority order three schools of your choice. Indicate specific departments and/or programs. Give specific reasons for each choice. If you have been in contact with professors, please provide names, email, and/or phone contacts for each one. Your preferences will be taken into consideration insofar as possible.</p>	

**45. MOST HIGHLY PREFERRED INSTITUTIONS**

UNIVERSITY	DEPARTMENT	DEGREE	SPECIALIZATION/ CONCENTRATION	SPECIFIC REASONS AND CONTACTS
1.				
2.				
3.				

**46. OTHER INSTITUTIONS IN WHICH YOU MAY BE INTERESTED**

Please list any other U.S. institutions and departments in which you also may be interested. Feel free to share other information that you think might be helpful, e.g. preference for a geographic location, climate, etc.

**47. It is not expected that you will apply for admission by direct application or correspondence with a university in the United States.**

If, however, you have already submitted an application form directly to any universities in the U.S., list the names of these institutions below and indicate the response you have received, if any. Please attach letters of admission, letters of invitation, and deferral requests to your application.

University/Department	Date of Application	Response to Application

NAME:	COUNTRY:
<b>SIGNATURE FORM</b>	

**INSTRUCTIONS: You must sign and date this form and forward it to the Fulbright Program Office in your home country.**

**By my signature,**

*I authorize the Fulbright Program Office or its administrative agency:*

- 1) to receive, and/or to request my TOEFL, TSE, TWE, GRE, SAT, Achievement Test scores or any other test score reports;
- 2) to send any of the above score reports to U.S. institutions on my behalf;
- 3) to apply on my behalf to U.S. institutions;
- 4) to request and receive information on the status of my application, including financial aid, from U.S. institutions; and,
- 5) to accept and decline offers of admission and financial aid on my behalf.

**AND**

I certify that the information given in this application is complete and accurate to the best of my knowledge.

I understand that I am not entitled to hold, nor do I hold, U.S. citizenship or permanent residence.

I understand that formal award of a grant is dependent upon my acceptance to a U.S. institution for study and my eligibility for a visa to the United States.

Upon the completion of an authorized stay in the United States under the Fulbright Student Program, I agree to return to my home country for two (2) years to fulfill my home residency requirement.

Signature	Date (Month/Day/Year)
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# FULBRIGHT PROGRAM

## APPLICATION FOR STUDY IN THE UNITED STATES

### CONFIDENTIAL LETTER OF REFERENCE

This letter of reference must be written by a teacher under whom the applicant has studied or pursued research in the proposed field of study or by someone who has supervised the applicant in work related to the proposed field of study. This letter must be typewritten and in English. If not in English, then an accurate translation must be attached.

NAME OF APPLICANT	COUNTRY
-------------------	---------

TITLE
-------

INSTITUTION OR BUSINESS
-------------------------

ADDRESS	CITY
COUNTRY	POSTAL CODE
PHONE NUMBER	E-MAIL ADDRESS

HOW LONG HAVE YOU KNOWN THE APPLICANT?
----------------------------------------

IN WHAT CAPACITY HAVE YOU KNOWN THE APPLICANT?

- Teacher or Professor                     
  Employer or Job Supervisor                     
  Research Adviser                     
  Other (Please Specify)

3. IN THIS RATING CHART, PLEASE EVALUATE THE APPLICANT IN COMPARISON WITH OTHER STUDENTS WHOM YOU HAVE KNOWN DURING YOUR PROFESSIONAL CAREER.

	Excellent	Very Good	Average	Below Average	Not Applicable
Intellectual Ability	<input type="checkbox"/>				
Knowledge of Field	<input type="checkbox"/>				
Work Habits	<input type="checkbox"/>				
Motivation to Pursue Graduate Study	<input type="checkbox"/>				
Seriousness of Purpose	<input type="checkbox"/>				
Potential For Significant Future Contribution in Field	<input type="checkbox"/>				
Resourcefulness and Initiative	<input type="checkbox"/>				
Emotional Maturity	<input type="checkbox"/>				
Adaptability to New Situations	<input type="checkbox"/>				
Leadership Qualities	<input type="checkbox"/>				
Teaching Potential	<input type="checkbox"/>				

NAME OF APPLICANT	COUNTRY
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**CONFIDENTIAL LETTER OF REFERENCE (Continued)**

3. PLEASE PROVIDE A CANDID EVALUATION OF THE APPLICANT'S PAST PERFORMANCE AND ABILITY TO PURSUE AND SUCCESSFULLY COMPLETE A PROGRAM OF STUDY IN THE PROPOSED FIELD. YOUR INFORMATION WILL BE GIVEN CONSIDERABLE IMPORTANCE IN REVIEWING THIS APPLICATION.

--

NAME ( <i>Print</i> )	
SIGNATURE	DATE

Please hand-sign this recommendation form and return to: [MaputoExchangePrograms@state.gov](mailto:MaputoExchangePrograms@state.gov)

**NOTE: The Fulbright Program cannot guarantee this letter's confidentiality once it becomes part of a university's records.**