

STUDY OF THE UNITED STATES INSTITUTES

SUSI for SCHOLARS 2016



APPLICATION FOR FACULTY MEMBERS AND RESEARCHERS

PERSONAL INFORMATION:

1. Full name of the applicant (as it appears in passport):

Last name(s)

First name

Middle name

2. Gender: _____ 3. Date of Birth: _____

Month DD YYYY

4. Birthplace : _____

City Country

5. Country of Residence: _____ 6. Country of Citizenship: _____

7. Immigration Information:

Do you have a U.S. visa? Yes No If yes, type of visa: _____

Are you a U.S. citizen? Yes No Are you a permanent resident in the U.S.? Yes No

8. Home Address: _____

Home Phone: _____ Cell Phone: _____ E-mail address: _____

9. Office Phone: _____ Fax: _____ A/E-mail address: _____

10. Emergency Contact & Relationship: _____

Emergency Phone: _____ E-mail address: _____

11. Medical, physical, dietary or other personal considerations: _____

12. Nominating Institution: _____

Mailing Address: _____

Short narrative of the institution: _____

PROFESSIONAL CONSIDERATIONS

13. Present position and title: _____

14. Current institutional affiliation and complete address: _____

15. Work experience, including previous positions (include time-frames,) institutional affiliations, and titles: _____

16. Education, academic and professional training, including degrees earned and fields of specialization and teacher qualifications: _____

17. Active professional membership: _____

18. Short list of relevant publications (no more than 10 citations): _____

19. Previous travel and study or research experience in the United States, including dates and an indication as to whether such travel was supported by U.S. Government funds.

Do you have close family residing in the U.S.? Yes No

If yes, please fill out the following:

Full name(s)/city and state (Example: John Doe, Chicago, IL)

Note: Having close family residing in the U.S. will not affect candidate's nomination.

20. Evidence of fluency in written and oral English (E.G. personal interview, test score, etc.)

21. Personal essay (250 words) by the candidate indicating the topic he/she is interested in participating and what of his/her professional goals will be enhanced by the participation in this program. (Please use an attached page for your statement.)

22. Professional Responsibilities: please discuss your professional responsibilities in greater detail, including research interests, administrative responsibilities (if any) and other pertinent information.

23. Please list current courses taught:

24. Please indicate current student advising (please indicate number of students, level, and hours you spend in advising and providing assistance to the students:

25. Please indicate any extra-Curricular/Co-Curricular activities Leadership:
