U.S. Department of State

PARTICIPANT APPLICATION

2014-2015 GLOBAL UNDERGRADUATE EXCHANGE PROGRAM

OMB APPROVAL NO. 1405-0138
EXPIRATION DATE 02/28/2015
ESTIMATED BURDEN: 45 MINUTES*

1. **Name** *(As Written on Official Documents)* _____
   (Family Name) *(First Name)* *(Middle Name)*
2. **Country or Countries of Citizenship** _____
3. **Country of Legal Residence** _____
4. **Place of Birth** _____
   (City or Town) *(Country)*
5. **Date of Birth** _____
   (Month) *(Day)* *(Year)*
6. **Gender** ☐ Male ☐ Female
7. **Marital Status** ☐ Single ☐ Married **Citizenship(s) of Spouse** *(If Applicable)* _____
8. **In order to respond to required U.S. Government inquiries, please check the box below, on a voluntary basis, if you have the following disabilities:**
   ☐ Hearing Impairment ☐ Speech Impairment ☐ Visual Impairment (*Legally Blind*) ☐ Orthopedic Impairment
   ☐ Learning Disorder ☐ Other *(Specify)* _____
9. **Current Contact Information**
   Address Type: ☐ Permanent Residence ☐ Dormitory ☐ Temporary Residence (*Other Than Dormitory*)
   Street/Building Number _____ Apartment _____
   City _____ Postal Index _____
   Region _____ Country _____
   Telephone ( ) _____ Fax ( ) _____ Email _____
   Cell Phone *(If Applicable)* ( ) _____
10. **Permanent Home Address** ***(If Different from Current)***
   Street/Building Number _____ Apartment _____
   City _____ Postal Index _____
   Region _____ Country _____
   Telephone ( ) _____ Fax ( ) _____ Email _____
   Cell Phone *(If Applicable)* ( ) _____

Paperwork Reduction Act Statement

The information gathered is used by the U.S. Department of State's Bureau of Educational and Cultural Affairs (ECA) to inform program design, management, and funding. The information collection activity involved with the program is conducted pursuant to the mandate given to the U.S. Department of State under the terms and conditions of the Mutual Educational and Cultural Exchange Act of 1961, Public Law 87-256.

Public reporting burden for this collection of information is estimated to average 45 minutes per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: ECA/A/E, 2200 C Street, NW, SA-5, 4M02, Washington, DC 20522-0504.

11. Work Address *(If Applicable)*

Name of Business _____

Title/Position _____

Street _____

City _____ Postal Index _____

Country _____ Telephone ( ) _____ Fax ( ) _____

12. Educational Background

In the table below, please list all universities, institutes, and special academic programs you have attended or are currently attending, with the most recent listed first. Transliterate directly from your native language into English spelling all words pertaining to your education. Do not use American equivalents unless you hold a degree from a U.S. academic institution.

Example

Institution and City	Department	Dates *(Month-Year)*	Type of Degree	Date Degree Received or Expected
Moscow State University, Moscow	Department of Journalism	August 1990 - May 1995	Diploma	May 1995

Institution and City	Department	Dates *(Month-Year)*	Type of Degree	Date Degree Received or Expected

13. Testing

If you have not taken the Test of English as a Foreign Language (*TOEFL*), Graduate Records Examinations (*GRE*), or the Graduate Management Admission Test (*GMAT*) and are selected as semi-finalist, you may be required to take the TOEFL and GRE or GMAT (*business administration applicants*) exams. The cost of these examinations will be covered by this program.

If you have previously taken any of the above-mentioned examinations, please give your score and the date and place where you took the examination. Attach a copy of your score report to the application if available. If selected, you may be required to submit official test results via ETS directly to the programming agency.

TOEFL Score _____ Date *(mm-dd-yyyy)* _____ Location _____

GRE Score _____ Date *(mm-dd-yyyy)* _____ Location _____

GMAT Score _____ Date *(mm-dd-yyyy)* _____ Location _____

☐ I have not taken the TOEFL, GRE, GMAT examination.

14. University Courses List below, in English, all the university courses you have taken, and the grades you received. First-year students should list their current university courses followed by their 11th form courses and final grades.

Attach additional pages if necessary. Describe the grading system used (*example: "5"= excellent to "1"=failing, "A"= excellent to "F"= failing*):

Academic Years (*for example, 2004-2005*)	Subject/Course (*Class Title*)	Grade

15. Contact Information

Native Language is _____

During the selection process, it may be necessary for one of our offices to contact you. To assist our offices in maintaining accurate records, please respond in English to the following section.

Name _____
(Family Name) *(First Name)* *(Middle Name)*

Street/Building Number _____ Apartment _____

City _____ Postal Index _____

Country _____ Region _____

Please respond in english to the following information with either your current academic institution information or employer information, whichever is currently applicable:

Current Academic Institution/Employer _____

Department/Position _____

Dean or Academic Advisor/Supervisor Name _____

Dean or Advisor Telephone ( ) _____

Emergency Contact Name _____ Relationship _____

Emergency Contact Address _____

Emergency Contact Phone/Fax/Email _____

16. Proposed Field of Study in The U.S. Please indicate one specialization that most closely matches your current specialization from the list of eligible fields available in the application instructions.

If selected as a finalist, applicants may not change their field of study during the program.

Proposed Field _____

17. Current Academic Institution _____

FACULTY/DEPARTMENT _____

Street _____

City _____ Postal Index _____

Country _____ Telephone ( ) _____ Fax ( ) _____

18. Present Course Year: ☐ First ☐ Second ☐ Third ☐ Fourth

19. Expected Graduation Date (*month/year*) _____

20. Current Specialization/Major in Home Country _____

21. Previous VISA Information

a. Have you previously traveled on a U.S. Government-sponsored or other U.S. exchange program? ☐ Yes ☐ No

If yes, please complete the following:

Name _____ Year*(s)* _____

Location in the U.S. _____
(City) *(State)*

b. Have you ever received a U.S. J-1 Visa? ☐ Yes ☐ No

If yes, list dates showing exact duration of stay in the United States on a J-1 visa (*month-day-year - month-day-year).*

_____

c. Have you ever received a U.S. F-1 Visa? ☐ Yes ☐ No

If yes, list dates showing exact duration of stay in the United States on a F-1 visa (*month-day-year - month-day-year).*

_____

d. Have you been in the U.S. for any other reason? ☐ Yes ☐ No

If yes, please list the duration of stay in the United States, except for visits to the United States as a tourist (*month-day-year - month-day-year*).

_____

22. Extra-Curricular Activities Please list all volunteer positions, work experience, awards, and leadership positions you have held within the past four years.

_____

_____

_____

_____

_____

23. How long did it take you to answer this survey? _____ **minutes.**