



FIELD OF STUDIES:

# FULBRIGHT STUDENT PROGRAM

## APPLICATION FOR STUDY IN THE UNITED STATES

### GENERAL INFORMATION

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

Prefix

Family

First

Middle

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

**Do not complete shaded area. For Fulbright Program use only.**

3. CURRENT MAILING ADDRESS: **Comisión Fulbright  
Calle Juan Romero Hidalgo 444  
San Borja  
475-3083**

4. A) PERMANENT MAILING ADDRESS:

Street \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_

B) CONTACT INFORMATION:

Telephone/Cellphone \_\_\_\_\_

E-mail \_\_\_\_\_

5. DATE OF BIRTH: (Month/Day/Year) \_\_\_\_\_

6. GENDER: \_\_\_\_\_

7. BIRTHPLACE: (City, State/Province, Country) \_\_\_\_\_

10. DO YOU NOW HAVE, OR HAVE YOU EVER HELD:

U.S. CITIZENSHIP? \_\_\_\_\_

U.S. DUAL CITIZENSHIP? \_\_\_\_\_

U.S. PERMANENT RESIDENCY? \_\_\_\_\_

8. COUNTRY OF CITIZENSHIP: \_\_\_\_\_

9. COUNTRY OF RESIDENCE: \_\_\_\_\_

### STUDY PLANS

11. WHICH APPLICATION CYCLE ARE YOU APPLYING TO?

DEGREE OBJECTIVE:

If other (specify):

12. WHAT IS YOUR PROPOSED MAJOR FIELD OF STUDY? WHAT IS YOUR SPECIALIZATION IN FIELD? BRIEFLY DESCRIBE THE SPECIFIC AREA OF THE 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<br><i>(List in reverse order. Write name in full.<br/>Do not abbreviate)</i> | MAJOR FIELD OF STUDY | DATES (Month/Year) |    | ACTUAL NAME OF DEGREE OR DIPLOMA<br><i>(Do not translate)</i> | 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. IF POSTED ONLINE, PLEASE PROVIDE US WITH THE URL/WEBSITE ADDRESS. *(Give title, place and date of publication.)*

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.)*

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

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



NAME: \_\_\_\_\_

**OCCUPATIONAL EXPERIENCE**

21. IDENTIFY YOUR CURRENT POSITION OR OCCUPATION. *(Select 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/Year) |    |
|------------------------------|--------------------|--------------------|----|
|                              |                    | From               | To |
|                              |                    |                    |    |
|                              |                    |                    |    |
|                              |                    |                    |    |

23. LANGUAGE SKILLS: *(Rate yourself Excellent, Good, Fair, or Poor Include all languages in which you have some competence.)*

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

| LANGUAGE | READING | WRITING | SPEAKING | YEARS STUDIED |
|----------|---------|---------|----------|---------------|
|          |         |         |          |               |
|          |         |         |          |               |
|          |         |         |          |               |
|          |         |         |          |               |

**EXAMINATION RESULTS**

24. 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 General Exam | _____        | _____ | _____              | _____ | _____            | _____ |
| IELTS _____           | _____ | _____      |                  | _____        | _____ | _____              | _____ | _____            | _____ |
| TWE _____             | _____ | _____      |                  | _____        | _____ | _____              | _____ | _____            | _____ |
| GMAT _____            | _____ | _____      |                  | _____        | _____ | _____              | _____ | _____            | _____ |
| Other _____           | _____ | _____      | GRE Subject Exam | _____        | _____ | _____              | _____ | _____            | _____ |
| Other test name _____ | _____ | _____      |                  | _____        | _____ | _____              | _____ | _____            | _____ |
| Other _____           | _____ | _____      |                  | _____        | _____ | _____              | _____ | _____            | _____ |
| Other test name _____ | _____ | _____      | _____            | _____        | _____ | _____              | _____ | _____            | _____ |

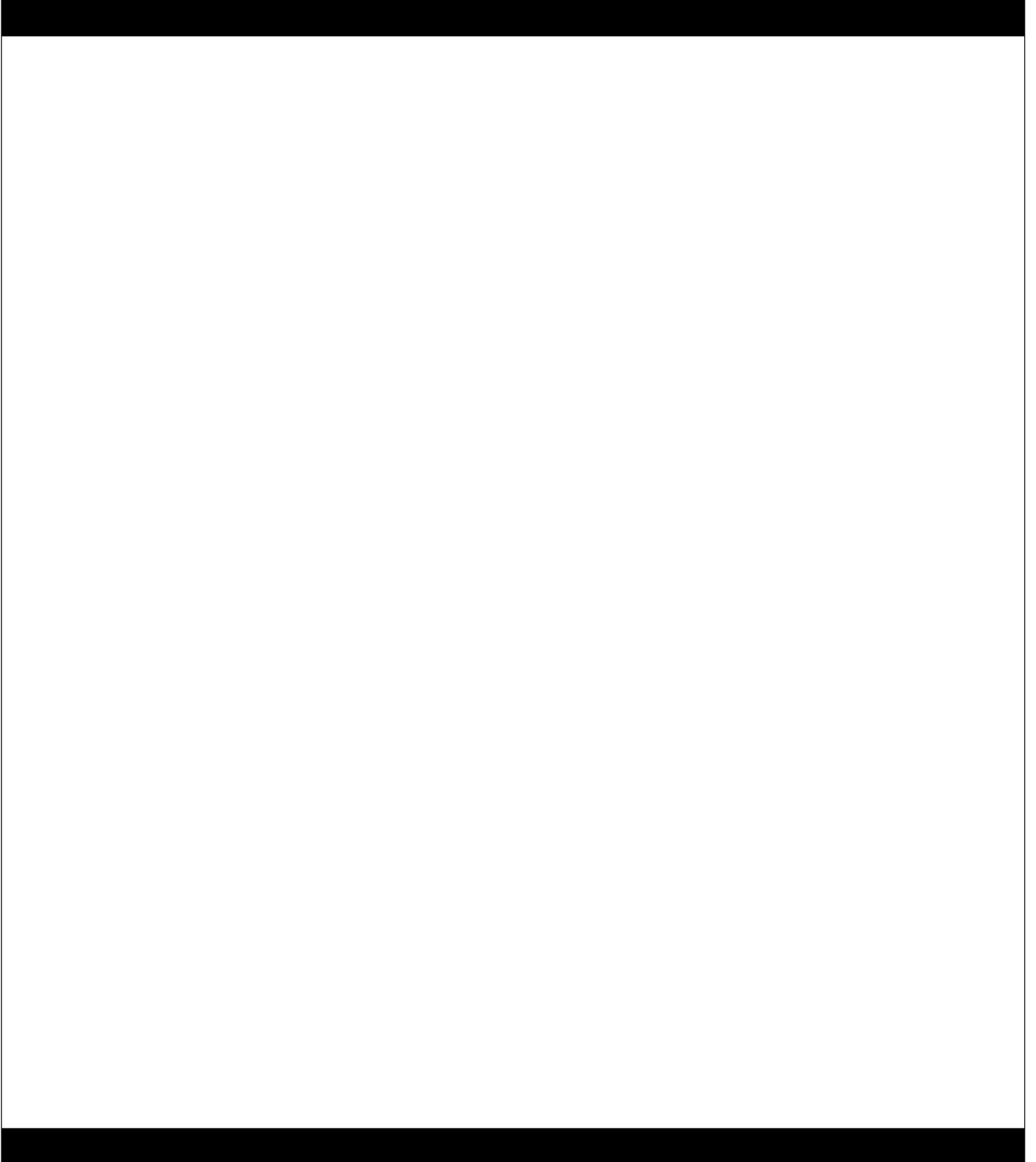
25. IF YOU HAVE TRAVELED, LIVED, OR STUDIED IN ANY COUNTRY OTHER THAN YOUR OWN FOR MORE THAN A MONTH, INDICATE PLACES, DATES AND REASONS. *(Education, research, business, vacation, etc.)*

**EMERGENCY CONTACT: NAME, ADDRESS AND TELEPHONE NUMBER OF INDIVIDUALS TO BE NOTIFIED IN CASE OF AN EMERGENCY**

| 26. IN YOUR HOME COUNTRY               | 27. IN THE UNITED STATES               |
|--|--|
| Family _____ First _____               | Family _____ First _____               |
| Street _____                           | Street _____                           |
| City _____                             | City _____                             |
| State/Province _____ Postal Code _____ | State/Province _____ Postal Code _____ |
| Country _____                          | Country _____                          |
| Telephone _____                        | Telephone _____                        |
| Email _____                            | Email _____                            |
| Relationship to you _____              | Relationship to you _____              |

WRITE A CLEAR AND DETAILED DESCRIPTION OF YOUR STUDY OBJECTIVES, and give your reasons for wanting to pursue them in the U.S. 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. Your statement is an essential part of your application. Unclear, incomplete or impractical proposals can result in your being referred to a university not suited to your scholastic needs, or your not being accepted by any university. DO NOT name specific universities at which you would like to study.

**Study objectives**

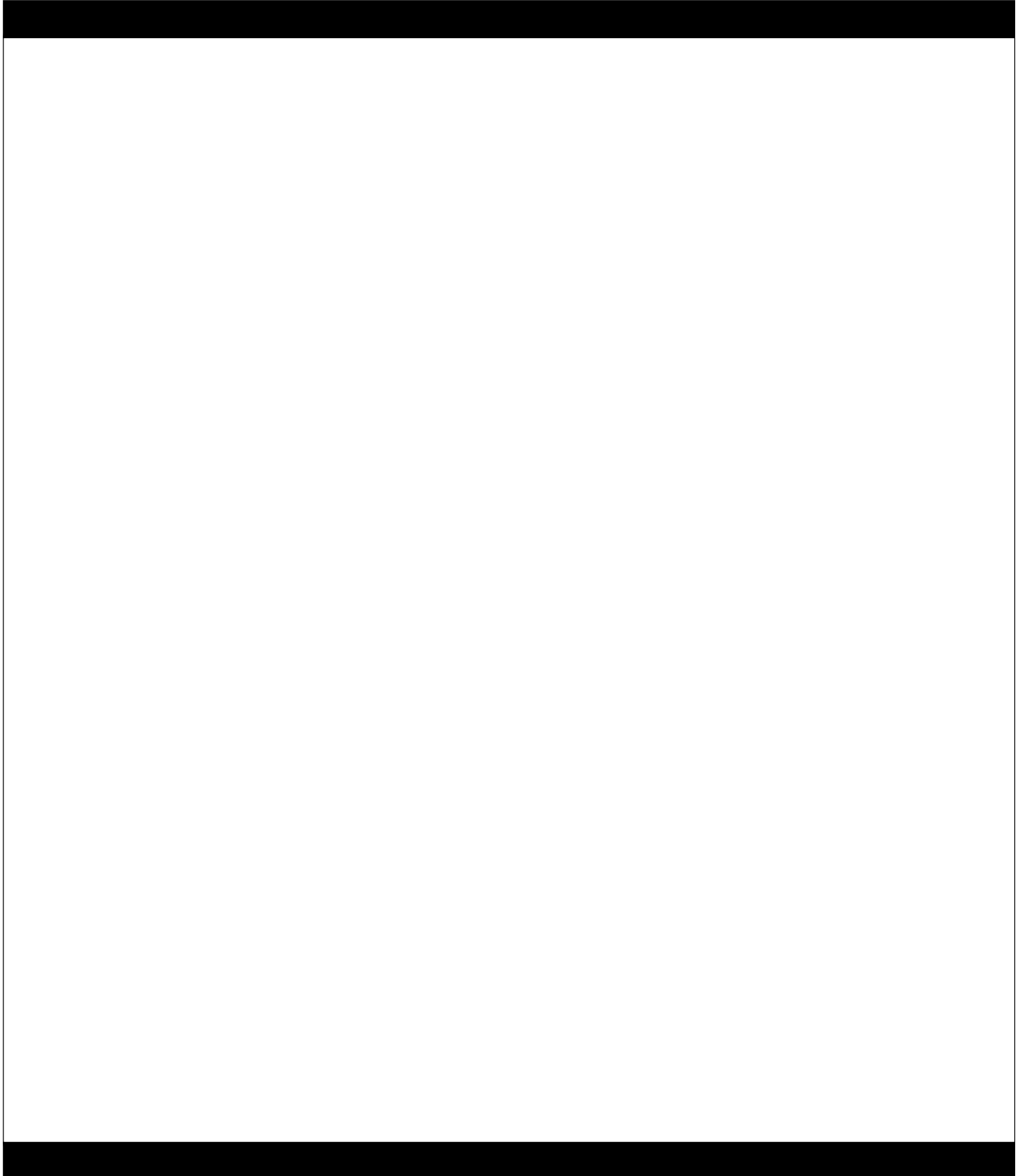


**Study objectives (Continued)**

A large, empty rectangular area intended for writing study objectives. It is bounded by a thick black border at the top and bottom, and a thin black border on the left and right sides. The interior of the rectangle is completely blank white space.

This Curriculum Vitae should be a narrative statement concerning your professional, academic and future plans. It should not be a mere listing of the facts. It should include information about your education, practical experience, special interests, career plans, and your purpose in applying for study in the U.S. Describe any significant factors that have influenced your educational or professional development. Advanced students should 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. and describe briefly the most advanced courses already pursued in their field of study. **(Do not mention specific U.S. Institutions in your Curriculum Vitae.)**

### Curriculum Vitae



**Curriculum Vitae (Continued)**

A large, empty rectangular area intended for the user to enter their curriculum vitae information. The area is bounded by a thick black border on the top, bottom, and sides, leaving a wide white space in the center.



NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_  
 DATE: \_\_\_\_\_

**PERSONAL INFORMATION**

**30. CURRENT MAILING ADDRESS:**  
 Street: \_\_\_\_\_ Apartment Number: \_\_\_\_\_ City: \_\_\_\_\_  
 State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Email: \_\_\_\_\_ **31. NATIONAL IDENTIFICATION NUMBER:** \_\_\_\_\_

**32. MARITAL STATUS:** \_\_\_\_\_ **33. NUMBER OF DEPENDENTS: (spouse and children)** \_\_\_\_\_

**34. 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.)*

**35. 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.)*

**36. REFERENCES:** List the names of persons from whom you have requested letters of reference.  
 The Family Educational Rights and Privacy Act of 1974 and its amendments guarantee students access to educational records concerning them. Students are also permitted to waive their right of access to recommendations.  
 I DO WAIVE my right to inspect the contents of the recommendation.  I DO NOT WAIVE my right to inspect the contents of the recommendation.

| Name | Position/Email | Address |
|------|----------------|---------|
| 1.   |                |         |
| 2.   |                |         |
| 3.   |                |         |

**37. PROPOSED LENGTH OF STAY IN THE U.S.:** \_\_\_\_\_ **38. APPROXIMATE ARRIVAL DATE:** \_\_\_\_\_ (Month/Year)

**39. HOW DID YOU LEARN OF THIS YEAR'S FULBRIGHT COMPETITION?** *(Please indicate all that apply.)*

|                      |                             |
|----------------------|-----------------------------|
| Friend or relative   | Other Publication (specify) |
| Previous Fulbrighter | Fulbright website           |
| Poster/Flyer         | Internet link (specify)     |
| University (specify) | Facebook                    |
| Newspaper (specify)  | Other (specify)             |

**HAVE YOU PARTICIPATED IN ANY OF THE U.S. GOVERNMENT SPONSORED PROGRAMS LISTED BELOW?** *(Please indicate all that apply.)*

|  |  |
|--|--|
| English Access Micro Scholarship                   | Fulbright Language Teaching Assistant Program (FLTA) |
| Global Undergraduate Scholarship (UGRAD)           | Muskie Fellowship                                    |
| Kennedy-Lugar Youth Exchange & Study Program (YES) | Humphrey Fellowship                                  |
| Future Leaders Exchange Program (FLEX)             | Undergraduate Intensive English Language Scholarship |
| Study of the US Summer Institute                   | Timor or South Pacific Scholarship                   |
| Summer Institute for Young Leaders                 | Other (specify)                                      |

**40. AUTHORIZATION OF RELEASE OF INFORMATION:**  
 I authorize the Fulbright Program Office or its administrative agency:  Yes  No

- to review, receive, and/or request any standardized test score reports for exams I have taken, including but not limited to TOEFL, TWE, IELTS, GMAT, GRE, SAT, and ACT exams;
- to send standardized test score reports to U.S. institutions on my behalf;
- to apply on my behalf to U.S. institutions;
- to request and receive information on the status of my application, including financial aid, from U.S. institutions; and,
- to accept and decline offers of admission and financial aid on my behalf.





NAME: \_\_\_\_\_ SIGNATURARE: \_\_\_\_\_  
 DATE: \_\_\_\_\_

**PERSONAL FINANCIAL INFORMATION**

Because some scholarships provide for only 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. FUNDS AVAILABLE FOR YOUR FIRST YEAR OF STUDY IN THE UNITED STATES (U.S. Dollars)**

(a) Family Funds

1. Father's occupation: \_\_\_\_\_ Mother's occupation: \_\_\_\_\_ Spouse's occupation: \_\_\_\_\_  
 2. What is the total amount your family can provide for your FIRST YEAR of study in the U.S.? \$ \_\_\_\_\_

(b) Your Own Funds

What is the total amount you can provide from your own funds for your FIRST YEAR of study in the U.S.? \$ \_\_\_\_\_

(c) Other Funds

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?  Yes  No  
 If so, identify the source and indicate the estimated amount?

| Source | Estimated Amount |  |
|--------|------------------|--|
| _____  | \$ _____         |  |
| _____  | \$ _____         |  |
| _____  | \$ _____         |  |
|        |                  | Subtotal of C \$ _____                     |
|        |                  | <b>GRAND TOTAL of A, B, and C</b> \$ _____ |

**42. FUNDS AVAILABLE AFTER YOUR FIRST YEAR OF STUDY IN THE UNITED STATES**

(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.?  Yes  No

(b) If "No" please specify the amount that will be available to you the SECOND YEAR:

|                            |    |                 |
|----------------------------|----|-----------------|
| 1. Family Funds:           | \$ | _____           |
| 2. Your Own Funds:         | \$ | _____           |
| 3. Other Funds:            | \$ | _____           |
| <b>TOTAL of 1, 2 and 3</b> |    | <b>\$ _____</b> |

**43. TRAVEL FUNDS (Do not include funds specified in Sections 42 and 43 above)**

(a) Can you pay for your round-trip travel to the U.S. if necessary?  Yes  No

(b) Specify the amount you have available for round-trip travel: \$ \_\_\_\_\_

**44. DEPENDENTS**

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.

(a) List the relationships and ages of any persons who will require financial assistance from you during your stay in the U.S. -

(b) Will these dependents accompany you to the U.S.?  Yes  No  
 If "Yes", state how you intend to provide for them during your year of study in the U.S.:



|       |            |
|-------|------------|
| NAME: | SIGNATURE: |
|       | DATE:      |

**UNIVERSITY PREFERENCES**

It is not a requirement nor is it expected for you to identify institutions at which you would like to study. However, if you do have preferences, please list in priority order up to 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 and email and/or phone contacts for each one. Your preferences will be taken into consideration insofar as possible. However, please understand that there is no guarantee that your application will be sent to these programs. Applications are made on your behalf to programs that provide a good 'academic fit' based on your study plans and your competitiveness. The goals and priorities of your scholarship sponsor are also strongly considered.

**45. MOST HIGHLY PREFERRED INSTITUTIONS**

| University, Department, Degree | Specialization/Concentration<br>Specific Reasons and Contacts |
|--------------------------------|---|
| 1.                             |   |
| 2.                             |   |
| 3.                             |   |

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

Please list any other institutions and departments in which you also may be interested. Again, please understand that there is no guarantee that your application will be sent to these programs.

**47. INSTITUTIONS TO WHICH YOU HAVE APPLIED**

It is not expected that you will have applied for admission to U.S. institutions; however, if you have already submitted an application directly to any universities in the U.S. over the past three years, list the names of these institutions and indicate the response you have received, if any.

**Please mail letters of admission, letters of invitation, and deferral requests to the address located in the Supplemental Forms section.**

| University/Department | Date of Application | Response to Application |
|-----------------------|---------------------|-------------------------|
|                       |                     |                         |
|                       |                     |                         |
|                       |                     |                         |