



## APPLICATION 2019

### UNITED STATES - TIMOR-LESTE SCHOLARSHIP PROGRAM

#### Personal Information

#### Biographical Information

**Name** (As Written on Your Passport- for instance, if your middle name is included as part of your first name in your passport, please write it that way here.)

\_\_\_\_\_ (Family Name)

\_\_\_\_\_ (First Name)

#### Date of Birth

\_\_\_\_\_ (Month)

\_\_\_\_\_ (Day)

\_\_\_\_\_ (Year)

**Gender**  Male  Female

**Marital Status**  Single  Married

#### Place of Birth

\_\_\_\_\_ (City or Town)

\_\_\_\_\_ (Country)

#### Country of Citizenship

**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 (if none, leave blank):**

- Hearing Impairment  Speech Impairment  Visual Impairment (*Legally Blind*)  Orthopedic Impairment  
 Learning Disorder  Other (*Specify*) \_\_\_\_\_

#### Additional Information

a. Have you ever been arrested?  Yes  No

If yes, list the date, place and the reason for arrest:

\_\_\_\_\_

b. Have you ever been expelled from any academic institution?  Yes  No

If yes, list the date, institution, and reason for expulsion:

\_\_\_\_\_

#### Current Contact Information

(If you do not have a mailing address, please provide contact information by which we can best reach you)

Email \_\_\_\_\_

Street/Building Number, Apartment Number \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Name: \_\_\_\_\_

Region/District \_\_\_\_\_

Postal Code \_\_\_\_\_

Primary Phone \_\_\_\_\_

Secondary Phone \_\_\_\_\_

**Permanent Home Address** (If Different from Current)

Street/Building Number, Apartment Number \_\_\_\_\_

City \_\_\_\_\_

Country \_\_\_\_\_

Region/District \_\_\_\_\_

Postal Code \_\_\_\_\_

Primary Phone \_\_\_\_\_

Secondary Phone \_\_\_\_\_

**Emergency Contact Information**

First name \_\_\_\_\_

Last Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Home Phone \_\_\_\_\_

Street/Building Number, Apartment Number \_\_\_\_\_

City, Region/District \_\_\_\_\_

Country \_\_\_\_\_

Postal Code \_\_\_\_\_

Email \_\_\_\_\_

**Educational Information**

**Past/Current Educational Information** In the table below, please list all schools, universities, institutes, and special academic programs you have attended or are currently attending, with the most recent listed first. Do not use American equivalents for degrees unless you hold a degree from a U.S. academic institution.

**EXAMPLE:**

<i>National University of Timor-Leste</i>	<i>English Department</i>	<i>August 2006- May 2010</i>	<i>Diploma</i>	<i>May 2010</i>
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<b>Institution and City</b>	<b>Department/ Major</b> <i>(Main focus of your studies, if applicable)</i>	<b>Dates Attended</b> <i>(Month/Year to Month/Year)</i>	<b>Type of Degree</b>	<b>Date Degree Received or Expected</b>

**Proposed Field of Study in the U.S.** Please indicate one field of specialization you wish to pursue in the United States (What will you study in the U.S.?)

\_\_\_\_\_

Name: \_\_\_\_\_

**Non- Academic Experience**

**Non-Academic Activities** Please list your participation in extracurricular, non-academic activities **both during and after high school**. These include but are not limited to jobs or internships, community service, volunteer work, clubs or organizations, sports, or cultural activities. If you played a leadership role in these activities, be sure to explain this clearly. Please do not submit copies of the certificates reflecting your participation in these activities. If needed, the USTL team members will follow up with you individually to collect the copies.

Institution:	Supervisor/Contact Person Name:
Location:	Supervisor/Contact Person Email:
Approximate Hours Per Week:	Start Date (Month/Year:                      End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.	
Institution:	Supervisor/Contact Person Name:
Location:	Supervisor/Contact Person Email:
Approximate Hours Per Week:	Start Date (Month/Year:                      End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.	
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Institution:	Supervisor/Contact Person Name:
Location:	Supervisor/Contact Person Email:
Approximate Hours Per Week:	Start Date (Month/Year:                      End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.	

Name: \_\_\_\_\_

Institution:		Supervisor/Contact Person Name:	
Location:		Supervisor/Contact Person Email:	
Approximate Hours Per Week:		Start Date (Month/Year:	End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.			
Institution:		Supervisor/Contact Person Name:	
Location:		Supervisor/Contact Person Email:	
Approximate Hours Per Week:		Start Date (Month/Year:	End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.			
Institution:		Supervisor/Contact Person Name:	
Location:		Supervisor/Contact Person Email:	
Approximate Hours Per Week:		Start Date (Month/Year:	End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.			
Institution:		Supervisor/Contact Person Name:	
Location:		Supervisor/Contact Person Email:	
Approximate Hours Per Week:		Start Date (Month/Year:	End Date (Month/Year):
Activity: Please <i>describe in detail</i> the activity your organization/group performed and your contribution. Be sure to note any leadership role that you played within the organization.			

**Scholarships, Awards and Honors**

Please list any scholarships, awards, and honors you have received. Please explain who gave you the award and what it was for. Please do not submit the copies of the award certificates. If needed, the USTL Team members will follow up with you individually to collect the copies.

Name: \_\_\_\_\_

<i>Date (Month/Year)</i>	<i>Award/Honor</i>	<i>Organization/Purpose</i>

**International Experience**

**Previous VISA Information**

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).

\_\_\_\_\_

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 of Program \_\_\_\_\_ Date(s) \_\_\_\_\_

Location in the U.S. \_\_\_\_\_  
(City) (State)

**Language Ability**

What is your native language? \_\_\_\_\_

Knowledge of Foreign Languages, including English (rate your abilities: Poor, Fair, Good, Excellent):

<b>Language</b>	<b>Reading Ability</b>	<b>Writing Ability</b>	<b>Speaking Ability</b>

Name: \_\_\_\_\_

### Passport Information

Do you have an internationally recognized passport?  Yes  No  
If yes, please complete the following:

Spell your name exactly as it appears in your passport:

\_\_\_\_\_  
(Family Name) (First Name)

Country of issuance \_\_\_\_\_ Passport Number \_\_\_\_\_ Expiration date \_\_\_\_\_

If selected for the program, do you intend to travel to the U.S. on this passport?  Yes  No

*Your International Passport must be valid until November 30, 2019. Per non-immigrant visa regulations, visitors traveling to the United States are required to be in possession of passports that are valid for six months beyond the period of their intended stay in the United States. If you are selected as a semi-finalist and if your passport expires earlier than November 30th, 2019, you will be asked to apply for a new one immediately at your own cost.*

### Tests/Recruitment

**IELTS and TOEFL Testing** If you have not taken the International English Language Testing System (IELTS) or the Test of English as a Foreign Language (TOEFL®) and are selected as a semi-finalist, you may be required to take the Institutional TOEFL® exam. The cost of this examination will be covered by this program.

*If you have previously taken the IELTS or TOEFL examination, please give your score and the date and location of your examination. Please attach a copy of your score report to the application if available. If selected for the USTL Scholarship Program, you may be required to submit official test results directly to the programming agency.*

IELTS Score \_\_\_\_\_ Date (mm-dd-yyyy) \_\_\_\_\_ Location \_\_\_\_\_

TOEFL Score \_\_\_\_\_ Date (mm-dd-yyyy) \_\_\_\_\_ Location \_\_\_\_\_

### Recruitment Information

How did you learn about the USTL Program?

\_\_\_\_\_

**Essay Question/Personal Statement** – The personal statement is an essential part of the application and the selection process. The length of the essay is limited to a total of 3,000 characters, which translates roughly into 400-450 words (roughly 125 words per each of the topics listed below), typed on separate sheets of paper and attached to the application.

- **Your reason for applying to this program:** What specifically do you wish to gain through studying and living in the U.S.? What do you believe will be the greatest benefits to you personally? How do your goals for the program specifically relate to your long-term professional plans?
- **Your key strengths as a candidate for this program:** What makes you a uniquely well-suited candidate for the USTL scholarship? What do you believe will be the greatest challenges of studying abroad in the U.S.? What has prepared you academically and personally for these challenges? Be sure to be as specific as possible.
- **Your leadership potential:** When have you played a leadership role in your community, school, or university? How has this experience shaped your thinking about leadership in general? How will participation in the USTL Program strengthen your leadership abilities?
- **Your flexibility and adaptability:** Study abroad entails many cultural challenges. What experiences have you had that indicate you are sufficiently flexible and adaptable to meet these challenges successfully?

**Recommendation Letters** Identify two (2) individuals who will be writing letters of recommendation on your behalf. At least one should be from your current institution. Make sure these are people who are familiar with your academic and personal qualities. They should NOT to be completed by relatives or friends.

1. Recommender's Name (1) \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Name: \_\_\_\_\_

2. Recommender's Name (2) \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

## SIGNATURE

By providing my signature, I certify that, to the best of my knowledge, the information provided in my application is accurate and complete, and that I intend to return to my home country upon completion of my studies in the United States.

Signature: \_\_\_\_\_

Date (mm-dd-yyyy): \_\_\_\_\_

## CHECKLIST FOR COMPLETE APPLICATION

Before submitting your application, please be sure you have included all of the following **REQUIRED** components:

- Completed, signed USTL application form
- Personal statement in English
- Official transcript(s)
- Two letters of recommendation
- A copy of applicant's passport or government-issued identification
- A copy of TOEFL/IELTS score reports (if applicable)

**Application Deadline November 26th, 2018**

For more information on the USTL Program, please write to us at:

USTLScholarship@americancouncils.org

Or Contact:

Leopoldo Gusmao  
Public Affairs Office  
Email: PADili@state.gov  
Telephone: 3324684; Ext: 2035

**A paper copy of your completed application and supporting materials may be submitted to:**

Leopoldo Gusmao  
Public Affairs Office  
U.S Embassy Dili  
Rua Praia Dos Coqueiros  
Dili, Timor-Leste  
Telephone: 3324684; Ext; 2035  
Email: PADili@state.gov