



STUDY OF THE U.S. INSTITUTE FOR EUROPEAN STUDENT LEADERS ON ENVIRONMENTAL ISSUES

A PROGRAM OF THE BUREAU OF EDUCATIONAL AND CULTURAL AFFAIRS,
U.S. DEPARTMENT OF STATE

Please type this information, and submit the completed application to adviser@fulbright.be. The deadline to apply is 1 January 2018. If the candidate has completed any post-secondary courses, he or she should also submit transcripts (grade reports) for those courses along with the final application.

APPLICATION FORM

1. NAME	
2. COUNTRY OF CITIZENSHIP	
3. COUNTRY OF LEGAL RESIDENCE	
4. PLACE OF BIRTH	City: Country:
5. DATE OF BIRTH (MM/DD/YYYY)	
6. GENDER (Male/Female)	
7. CURRENT HOME ADDRESS	Street: Apartment (if applicable): City: Zip Code: Country:
8. PERMANENT HOME ADDRESS	Street: Apartment (if applicable): City: Zip Code: Country:
9. TELEPHONE	Home phone: Mobile phone:
10. EMAIL ADDRESS	

NAME _____

2018 Summer Institute for European Student Leaders

11. NAME OF CURRENT ACADEMIC INSTITUTION	
11b. FACULTY/DEPARTMENT	
11c. ACADEMIC INSTITUTION ADDRESS	Street: Apartment (if applicable): City: Zip Code: Country:
12. CURRENT YEAR OF STUDIES	
13. EXPECTED GRADUATION DATE	
14. CURRENT FIELD OF STUDY	
14b. SPECIALIZATION (if applicable)	

15. Have you ever traveled outside of Belgium? Yes No

15b. If yes, please list all countries in the box below.

16. Have you ever traveled to the United States? Yes No

16b. If yes, please explain your previous travel experience in the United States in the box below.

17. Please describe any pre-existing medical conditions or other dietary and personal consideration in the box below. The information you provide will not affect your selection in the program, but will enable the host institution to make any necessary accommodations.

NAME _____

2018 Summer Institute for European Student Leaders

18. Please rank your English language proficiency in the following areas:

- Speaking: Fair Good Excellent
Reading: Fair Good Excellent
Writing: Fair Good Excellent

19. If you have previously taken an official English language exam (e.g., TOEFL, IELTS), please list the name of the exam, your score and the date when you took the examination.

EXAM:	DATE:	SCORE:
-------	-------	--------

19. Please list all volunteer positions, work experience, awards, and leadership positions you have held within the past four years in the box below.

PERSONAL STATEMENTS & REFERENCES

20. Please attach three (3) separate short essays of no more than 500 words addressing the following questions:

- A. Why you are interested in participating in this program? What do you hope to learn?
- B. Using one or more examples, please describe a challenge at school, work, or in your personal life that you have had to overcome. How did you resolve the situation?
- C. Participants in the Summer Institutes use their summer experiences to give back to their communities. In what ways can you imagine giving back to your community after you participate in the Summer Institute?

21. Please complete the top portion of the two (2) attached reference forms. Copies should be filled out by your referees and submitted with the rest of the application.

Summer Institutes for European Student Leaders

REFERENCE FORM

This reference form may be completed by a supervisor at work, a professor/academic advisor/dean, or a community leader who knows the applicant well and is familiar with the applicant's academic and/or professional work. Relatives and friends of the applicant may not complete this recommendation form. This form should be typewritten in English, if possible. All recommendations must be signed at the bottom.

TO BE COMPLETED BY APPLICANT:

Name of Applicant _____
Country _____
Name of Evaluator/Reference _____
Title of Evaluator _____
Work Institution _____
Work Address of Evaluator _____
Work Telephone of Evaluator _____ Fax _____ E-mail _____

TO BE COMPLETED BY EVALUATOR:

1 How long have you known the applicant? _____

2 In what capacity have you known the applicant? Check all that apply.

- Teacher/Professor
 Job Supervisor
 Academic Advisor
 Other (please specify) _____

3 Please evaluate the applicant as compared to other students in terms of the characteristics below. (If you do not feel that you are capable to judge the student on this quality, please select N/A.)

	Excellent	Good	Fair	Poor	N/A
➤ Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Cross-cultural Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Initiative and Problem-Solving Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Creative and Independent Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Respect for Others/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Interest in Community Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4 Please choose one of the following:

- Recommend with confidence
 Recommend with reservation
 Do not recommend

Summer Institutes for European Student Leaders

REFERENCE FORM

- 5 Please submit short statements in the space provided, giving a candid evaluation of the applicant's past academic and/or work performance. Your statements will be given careful consideration by the selection panel reviewing this application. Therefore, your comments should be as complete and detailed as possible (attach additional pages if necessary).
-

1. Applicant's ability to express his/her ideas clearly both in writing and verbally.

2. Applicant's ability to interact well with other students and professors.

3. Applicant's strengths and weaknesses as a potential exchange student.

4. Applicant's outstanding or distinguishing talents and characteristics.

5. Applicant's potential to significantly contribute to the public sector in his/her home community.

I hereby confirm that the answers on this form are my own and represent my professional opinion of the applicant.

Signature of Evaluator _____

Date _____

Summer Institutes for European Student Leaders

REFERENCE FORM

This reference form may be completed by a supervisor at work, a professor/academic advisor/dean, or a community leader who knows the applicant well and is familiar with the applicant's academic and/or professional work. Relatives and friends of the applicant may not complete this recommendation form. This form should be typewritten in English, if possible. All recommendations must be signed at the bottom.

TO BE COMPLETED BY APPLICANT:

Name of Applicant _____
Country _____
Name of Evaluator/Reference _____
Title of Evaluator _____
Work Institution _____
Work Address of Evaluator _____
Work Telephone of Evaluator _____ Fax _____ E-mail _____

TO BE COMPLETED BY EVALUATOR:

1 How long have you known the applicant? _____

2 In what capacity have you known the applicant? Check all that apply.

- Teacher/Professor
 Job Supervisor
 Academic Advisor
 Other (please specify) _____

3 Please evaluate the applicant as compared to other students in terms of the characteristics below. (If you do not feel that you are capable to judge the student on this quality, please select N/A.)

	Excellent	Good	Fair	Poor	N/A
➤ Leadership Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Cross-cultural Interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Initiative and Problem-Solving Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Creative and Independent Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Interpersonal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Respect for Others/Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Interest in Community Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
➤ Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4 Please choose one of the following:

Recommend with confidence
 Recommend with reservation
 Do not recommend

Summer Institutes for European Student Leaders

REFERENCE FORM

- 5 Please submit short statements in the space provided, giving a candid evaluation of the applicant's past academic and/or work performance. Your statements will be given careful consideration by the selection panel reviewing this application. Therefore, your comments should be as complete and detailed as possible (attach additional pages if necessary).

1. Applicant's ability to express his/her ideas clearly both in writing and verbally.

2. Applicant's ability to interact well with other students and professors.

3. Applicant's strengths and weaknesses as a potential exchange student.

4. Applicant's outstanding or distinguishing talents and characteristics.

5. Applicant's potential to significantly contribute to the public sector in his/her home community.

I hereby confirm that the answers on this form are my own and represent my professional opinion of the applicant.

Signature of Evaluator _____

Date _____