



2016 BENJAMIN FRANKLIN TRANSATLANTIC FELLOWS INITIATIVE STUDENT APPLICATION FORM

IMPORTANT NOTE: This student application form has to be completed online. Handwritten or faxed forms will not be accepted. Once completed, please print and sign the application. You can then send all required documents by regular mail or scan the documents and send them by e-mail. Please be aware that you cannot save the information introduced in this form. We suggest you to draft the texts in a separate document and then copy them into the form.

DEADLINE: February 26, 2016 – 6 pm

AGE RANGE: 16 - 18

STUDENT INFORMATION

Name

(Exactly as it appears in your passport)

Home address

City

ZIP Code

Email

Home Phone

Cell Phone

Date of Birth

Age

Day / Month / Year

Female

Male

Place of Birth

Country of Citizenship

City and Country

SCHOOL INFORMATION

School you currently attend

Course

Address

Street / City / ZIP Code

School Telephone

LANGUAGES

English

Please attach official school transcript or certificate – Minimum grade acceptable is A

Please, indicate if you have additional English diplomas such as EOI, TOEFL, IELTS, Cambridge or any other.

List other languages besides your native language and English

Language Number of years studied

Language Number of years studied

BACKGROUND INFORMATION

Have you ever lived and/or studied anywhere outside of your country?

Yes No

If so, please provide a brief description, including dates and locations:

Please list and comment on any community service and volunteerism projects you are or have been involved in.

Why do you want to participate in the exchange program, and what will you contribute to the program if you are chosen? How will your participation benefit you or your community?

What are your future career plans? Briefly elaborate on your favorite fields of study.

INTERNATIONAL TRAVEL INFORMATION

(if you do not have a passport, please begin the application process now)

Passport Number Country that issued passport
Expiration Date

INFORMATION ON PARENTS OR GUARDIANS

Parent / Guardian 1

Name and Surname
Relation to you
Address
Street / City / ZIP Code
Email
Home Phone Cell Phone

Parent / Guardian 2

Name and Surname
Relation to you
Address
Street / City / ZIP Code
Email
Home Phone Cell Phone

YOUTUBE VIDEO

Link to your Youtube video

When uploading the video to YouTube, please mark it as "Unlisted" or "Oculto".

APPLICATION ESSAY

Please respond to the following essay question. Please answer in clear and concise English. Although we will be evaluating your English skills, we are most interested in your ideas. Please limit your statement to a maximum of **500 words**. **Hand written essays will not be accepted.**

What do you consider are the greatest needs of your community and what can you do to contribute to making it better?

CHECKLIST

To complete your application, make sure you have:

1. At least one letter of recommendation from teachers, school principal, or community leaders.
2. Parent or guardian approval (they must sign below).
3. Official School Transcript (minimum Grade Point Average: B).
4. English language certificate issued by your school showing a minimum grade of " A" or equivalent (i.e. B2 or C1*).
5. Proof of participation in volunteer or community service activities.
6. Link to your YouTube video.

PLEASE SIGN BELOW TO VERIFY THAT ALL INFORMATION ON THIS APPLICATION IS TRUE AND TO EXPRESS YOUR AGREEMENT TO PARTICIPATE IN ALL ACTIVITIES OF THE PROGRAM, INCLUDING ANY ACTIVITIES IN YOUR HOME COUNTRY BEFORE AND AFTER THE PROGRAM.

APPLICANT

PARENT

COMPLETE APPLICATIONS MUST BE SENT TO:

Cultural Affairs Office
Embassy of the United States of America
Serrano, 75
28006 Madrid
embusacultural@state.gov

APPLICATIONS FROM CATALONIA, ARAGÓN AND ANDORRA MUST BE SENT TO:

Public Diplomacy Section
Consulate General of the United States of America
Pg. Reina Elisenda de Montcada, 23
08034 Barcelona
usconsulatebarcelona-cultura@state.gov

* Common European Framework of Reference for Languages - CEFR