



Study of the U.S. Institutes (SUSIs) for Secondary Educators

Application Form

Select the Theme of the SUSI Institute (Secondary Educators): *

- Secondary Educators - Teachers
- Secondary Educators – Administrators

SECTION A: PERSONAL INFORMATION

Please provide information exactly as it appears in the passport.

Surname (Last Name): *

Given Name(s): *

Gender: *

- Female
- Male
- Non-binary
- Other

Date of Birth: *

Format M/D/YYYY

City of Birth: *

Country of Birth: *

Citizenship:

Primary Citizenship: *

Country of Residence: *

Secondary Citizenship (if applicable):

Contact Information:

Street Address: *

City: *

State/Province: *

Postal Code:

Country: *

Email Address: *

Medical, Physical, Dietary, or other Personal Considerations:

Please indicate if you have a disability. *

- None
- Blind or Visual Impairments
- Deaf or Hearing Impairments
- Learning Disability
- Physical Disability
- Psychiatric Disability
- Systemic Disability
- Other

Please describe any pre-existing medical conditions, including any prescription medication required, dietary restrictions, or personal considerations. *

Experience in the United States:

Have you traveled to the United States before? *

Yes

No

If yes, please list any previous travel to the United States for the purposes of tourism/vacation, conferences, educational study. Provide dates/duration, purpose of visit(s), and location.

Have you previously participated in or been accepted into a U.S. Department of State sponsored program? *

Yes

No

If yes, please provide the name of the program and the dates. *

Family Residing in the United States (if applicable):

Please include relation information, city, and state. (Example: Jane Doe, sister- Denver, CO)

SECTION B: PERSONAL BACKGROUND

Education: *

Please list all earned degrees beginning with the most recent.
Each entry should include the following information:

- Degree Earned (Degrees should reflect the closest U.S. equivalent.)
- Year Awarded
- Specialization
- Institution

(Example: Master's; 2019; International Relations; American University)

Additional Academic/Professional Training/ Workshops: *

Current Role/Job Title: *

Institution/Organization Name: *

Institution/Organization Country: *

Work History: *

Please limit work experience to the FIVE most recent job positions. Please provide the following information for each entry:

- Institution
- Dates of Employment (Month/Year-Month/Year)
- Title/Position (please specify if part-time)

(Ex. American University; 01/2019-01/2020; Professor of International Relations)

Professional Responsibilities: *

Discuss professional responsibilities in greater detail, including research interests, administrative responsibilities (example: curriculum design), and/or other pertinent information not included in the section above.

Current Courses Taught: *

If you are not currently teaching courses, please indicate NOT APPLICABLE.

Please include the following information for each course:

- Course Title
- Indicate Level of Students (Secondary School Students/Undergraduate Students/Graduate Students)
- Classroom Hours per Semester
- Number of Students
- Percent of U.S. Studies Content

Current Student Advising:

Advising is not the same as teaching. If you advise students please input the number of students, their level, and hours you spend providing assistance in helping students clarifying personal and career goals, and evaluating progress towards those goals. This section can also include those that supervise Ph.D. and graduate students.

Please include the following information:

- Number of Students Advised Studying U.S. Related Topics

- Indicate Level of Students (Secondary School Students/Undergraduate Students/Graduate Students)
- Hours of Advising Per Student Per Year

Publications Related to the Institute Theme:

Please list all foreign titles in English, including whether the publication was a book, chapter, journal article, newspaper article, etc. Please only list publications within the last five years.

Active Memberships in Professional Associations:

Please limit to three most relevant. Provide the position and organization.
(Example: President, Washington Educational Professionals Association.)

Other Leadership Positions Beyond Professional Duties:

Please provide the activity, position/title, year started, year completed, and the description of duties.

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Potential Outcomes: *

Please select any likely potential professional outcomes of this program:

- Create New Course
- Create New Degree Program
- School Curriculum Redesign
- National Curriculum Redesign
- New Research Project
- New Publication
- Professional Promotion
- Government or Ministry Policy
- New Professional Organization
- New Institutional Linkages
- Raise Institutional Profile Other

Candidate Personal Statement: *

As part of the SUSI application process, you should submit a personal statement about your background and goals. In up to 500 words, you should address the following questions and any other pertinent information:

- Why are you interested in participating in the Institute?
- What do you hope to gain from the Institute?
- What will you contribute to the Institute?
- How will you leverage the experience to achieve "other potential outcomes" checked in the above section?
- How will you amplify the impact of the program beyond your research and knowledge?



