

Preliminary Questions
NAME OF APPLICANT
Note: Name must appear exactly as it is shown on your passport.

Country of present citizenship

Which field of study are you applying for?

Bio Sheet A
General Information

Prefix

Last/Family Name

First Name

PERMANENT ADDRESS OF APPLICANT

Street/Address Line 1

City

Country

Telephone Number (country code-area/city code-Telephone number)

E-mail Address

POSTAL ADDRESS OF APPLICANT

Street/Address Line 1

City

State/Province

Country

Gender:

PLACE OF BIRTH

City or Town

Country

Date of Birth

**COUNTRY OF PRESENT
CITIZENSHIP**
**COUNTRY OF PRESENT
RESIDENCE**
**HAVE YOU HAD A FULBRIGHT
GRANT IN THE PAST?**

Fulbright Grants Include

*The Fulbright Foreign Student Program,
Fulbright Foreign Language Teaching Assistant Program,
Fulbright Visiting Scholar Program,
Fulbright Scholar-in-Residence Program,
Fulbright NEXUS Program,
Fulbright Classroom Teacher Exchange Program,
Fulbright Distinguished Awards in Teaching Program,
and the Humphrey Fellowship Program.*

Education

List all post-secondary educational institutions attended, beginning with the most recent, including any in which you are currently enrolled. Academic transcripts, copies of diplomas, and English translations should be submitted to the U.S. Embassy or Fulbright Commission in your country.

I. Name of Institution, University or Professional School	
Location	
Degree was completed online or through distance education	
Major field of study	
Dates Attended - From	
Dates Attended - To	
Actual name of degree or diploma	
Date received or expected	
II. Name of Institution, University or Professional School	
Location	
Degree was completed online or through distance education	
Major field of study	
Dates Attended - From	
Dates Attended - To	
Actual name of degree or diploma	
Date received or expected	
III. Name of Institution, University or Professional School	
Location	
Degree was completed online or through distance education	
Major field of study	
Dates Attended - From	
Dates Attended - To	
Actual name of degree or diploma	
Date received or expected	

IV. Name of Institution, University or Professional School	
Location	
Degree was completed online or through distance education	
Major field of study	
Dates Attended - From	
Dates Attended - To	
Actual name of degree or diploma	
Date received or expected	
Name your most significant publications/honors/awards/projects/other accomplishments. (250 words)	
Give a 50-word summary of your proposed program plan	

Current Occupation

Organization	
Your Job Title	
Date Employed From	
Date Employed To	
Current Position?	

Employer Address

Street/Address Line 1	
City	
Country	

Describe Your Current Job Responsibilities	
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Bio Sheet B

Previous Positions Held (beginning with the most recent)	
I. Organization	
Your Job Title	
Date Employed From	
Date Employed To	
Employer Address	
Street/Address Line 1	
City	
Country	
II. Organization	
Your Job Title	
Date Employed From	
Date Employed To	
Employer Address	
Street/Address Line 1	
City	
Country	
III. Organization	
Your Job Title	
Date Employed From	

Date Employed To	
Employer Address	
Street/Address Line 1	
City	
Country	
IV. Organization	
Your Job Title	
Date Employed From	
Date Employed To	
Employer Address	
Street/Address Line 1	
City	
Country	
Computer Proficiency Level	
Sending and receiving email	
Typing (keyboarding) in English	
Using Web search engines	
Using specialized databases to conduct research in your field	
Using Microsoft Word	
Using Microsoft Excel to create spreadsheets and charts	
Using Microsoft PowerPoint or Prezi to create a presentation	
Scanning, uploading, and downloading photographs	
Making online airline, train and hotel reservations	
Using social media (Facebook, Twitter, etc.)	
PLEASE INDICATE COUNTRIES OUTSIDE YOUR OWN, INCLUDING THE UNITED STATES, IN WHICH YOU HAVE LIVED, TRAVELED, OR STUDIED.	
I. Country Visited	
Reason For Visit	
Date of Visit - From	
Date of Visit - To	
II. Country Visited	
Reason For Visit	
Date of Visit - From	

Date of Visit - To	
III. Country Visited	
Reason For Visit	
Date of Visit - From	
Date of Visit - To	
IV. Country Visited	
Reason For Visit	
Date of Visit - From	
Date of Visit - To	
V. Country Visited	
Reason For Visit	
Date of Visit - From	
Date of Visit - To	
VI. Country Visited	
Reason For Visit	
Date of Visit - From	
Date of Visit - To	

Person To Be Notified in Case of Emergency (In Home Country)

Name of Contact Person	
Relationship	

ADDRESS

Street/Address Line 1	
City	
Zip code	
Country	
Telephone Number (country code-area/city code-telephone number)	

Certification

I certify that all information given in this application is complete and accurate to the best of my knowledge. I agree to abide by the Policies governing the selection of Fulbright/Humphrey grantees, as established by the J. William Fulbright Foreign Scholarship Board (FFSB) (complete policies available [here](#)). I understand that final approval of my application is dependent upon my eligibility for a J Visa in the United States. I also agree to return to my home country upon the expiration of my authorized stay in the United States.

Signature of Applicant	
Date	

Program Plan

Program Plan	
<p>Please describe your major area of interest and explain how this area addresses the specific development needs of your country. (250 words)</p>	
<p>Describe the type of Humphrey program you would like to design. Indicate the kinds of academic and professional experiences you would like to pursue. (250 words)</p>	
<p>Describe how the knowledge and skills you will gain will help you address your country's development needs. (250 words)</p>	

Program Statement A

Personal Statements A	
<p>Please describe how you have demonstrated a strong commitment to public service (i.e. community, civic involvement or professional responsibilities, etc.). (250 words)</p>	

<p>Please state your professional goals for the next five years. How will the Humphrey Program help you reach these goals? (250 words)</p>	
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Personal Statement B

<h3>Personal Statements B</h3>	
<p>Describe a problem or challenging situation that you resolved by using your initiative. What was the outcome? Please select this example carefully. It should illustrate something that you want the review panel to know about your problem-solving, leadership abilities, or commitment to public service. (500 words)</p>	

Personal Information

<h3>PERSONAL FINANCIAL INFORMATION</h3> <p>Indicate all funds in your local currency.</p>	
Your annual salary	
Indicate your local currency	
Income per year from other sources	
Will your salary be continued during your stay in the U.S.?	

<h3>DEPENDENTS</h3> <p>The Hubert H. Humphrey Fellowship Program does not provide allowances for dependents. If your dependents accompany you, you will be responsible for providing all travel, adequate medical insurance, and support for them. English/Orientation Centers cannot accommodate dependents. Dependents may not arrive until you are settled in your academic program and have found housing (at least 30 days after your arrival at academic placement).</p>
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Marital Status	
List the relationships and ages of any persons who will require financial assistance from you during your academic year in the U.S.	
I. Name	
Relationship	
Age	
II. Name	
Relationship	
Age	
III. Name	
Relationship	
Age	
IV. Name	
Relationship	
Age	
Will any dependents be with you in the U.S.?	

ENGLISH LANGUAGE PROGRAM

If required, will you be able to arrive for English language training as early as April?	
Will you be able to obtain a leave of absence from your current position for a period of 11 months, or up to 14 months if you require English training?	
When will you take a standardized test that assesses your English language ability, such as TOEFL?	

English Language

English Language	
Applicant's Native Language	

HISTORY OF APPLICANT'S FORMAL STUDY OF ENGLISH

Secondary School

Number of years	
Number of months per year	
Number of hours per week	
Native Language of Instructor	

University	
Number of years	
Number of months per year	
Number of hours per week	
Native Language of Instructor	

Private Study	
Number of years	
Number of months per year	
Number of hours per week	
Native Language of Instructor	

ENGLISH LANGUAGE TESTS	
Indicate the date on which you took or will take the official Test of English as a Foreign Language (TOEFL)	
Indicate the TOEFL score earned	
Institutional TOEFL (ITP) Date	
Institutional TOEFL (ITP) Score Earned	
Please note: The institutional TOEFL or ITP is only acceptable for the initial part of the process. You will need to take a TOEFL iBT exam if you are nominated.	
Duolingo Score Earned	