**Study of the United States Institutes (SUSI) **

**Student Leader Nomination Form**

U.S. Embassies/Consulates and Fulbright Commissions may distribute this form to potential applicants as part of the Study of the U.S. recruitment process.  Final nominations must be submitted by the U.S. Embassy or Consulate via the Study of the U.S. SharePoint Site as indicated in the call for nomination cable.

Potential nominees should direct all questions to the U.S. Embassies/Consulates and Fulbright Commission in your country.

A. Title of Institute:

Please Select

B. Nominee’s Full Name (As it appears on their Passport):

Prefix: Please Select

Last Name: 

First Name: 

Middle Name: 

C. Gender:

Male

Female

D. Date of Birth: Click here to enter a date.

E. Birth City: 

F. Birth Country: Please Select

G. Citizenship:

Primary: Please Select

Secondary (if applicable): Please Select

H. Country of Residence:

Please Select

I. Medical, Physical, Dietary, or Other Personal Considerations:

Please Select

*Please describe any pre-existing medical conditions, including any prescription medication the candidate may be taking, allergies, or other dietary or personal consideration. This will not affect candidates’ selection, but will enable the host institute to make any necessary accommodations.*



J. Candidate Contact Information:

Address: 

No P.O. Box 



City: 

Home State or Province: 

Postal Code: 

Home Country: Please Select

Email:  \*Required

Phone:  Numbers Only. For example: 1234567890

Emergency Contact Name and Relationship:  For example: John Doe, Husband

Emergency Contact Number:  Numbers only.

Emergency Contact Email: 

K. Academic Major, Institute

Major: 

Home Institute Country: Please Select

Institute: 

L. Work and Volunteer Experience:



M. Semesters left in School upon Completion of Institute:

Please Select

N. Semesters Completed in School

Please Select

O. Memberships in Associations, clubs, etc:

*\*Please include dates (Example: Student Government, May 2011 to June 2012).*



P. Previous Experience in the United States:

*Have you traveled to the U.S. before?* Yes  No

*If yes, please fill out the following section.*

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| --- | --- | --- |
| From | To | Purpose |
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Q. Family Residing in the United States:

*Do you have close family residing in the U.S.?* Yes  No

*If yes, please fill out the following section; if no, please write ‘None’.*

*Note: Having close family residing in the U.S. will not affect candidate’s nomination.*

*\*Please include city and state (Ex. John Doe – Chicago, IL)*



R. Evidence of English Fluency:



S. Candidate’s Personal Statement:

*Tell us about yourself and your goals including the following: What about your background and/or interests makes you competitive for this particular institute (please be as specific as possible)? What will you contribute to the group? How do you expect this experience will affect your future academic and professional career? How will it affect you personally? Please structure your essay in paragraphs and limit your response to 250 words, or approximately half a page, single spaced.*



**THE FOLLOWING TWO SECTIONS ARE TO BE COMPLETED BY U.S. EMBASSY AND FULBRIGHT COMMISSION ONLY. APPLICANTS SHOULD STOP FILLING OUT THIS FORM HERE.**

T. Statement by Post/Commission Justifying Participation of Nominee in the Institute:

*This is one of the most important components of the application. After having interviewed the candidate, please tell us about this individual and why post feels that s/he is well suited for this institute. What make this candidate unique? What, in particular, will this candidate contribute? Why is this a priority nomination for post?*



U. Post or Commission Action Officer:

*The person whom ECA/A/E/USS should contact with all inquires about the nomination.*

Post/Commission: Please Select

Post Country: Please Select

Region: Please Select

Post Contact Name: 

Post Contact Email: 

Secondary Post Contact Name: 

Secondary Post Contact Email: 

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