**SUSI for SCHOLARS APPLICATION**

**Institute Name (Please check only one institute)**

1. The Institute on **American Politics and Political Though**
2. The Institute on **Journalism and Media**
3. The Institute on **Contemporary American Literature**
4. The Institute on **U.S. Culture, Identity, and Society**
5. The Institute on **U.S. Economics and Sustainable Development**
6. The Institute on **U.S. Foreign Policy**

**A. Full Name,** exactly as it appears on your passport. Clearly identify what your first, middle and surnames are as they appear on your passport.

Last Name\_\_\_\_\_\_\_\_\_ First name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle name (if applicable)\_\_\_\_\_\_\_\_\_\_\_\_

**B. Gender:**

**C. Date of Birth** (please spell out Month, Day, Year):

**D. City of Birth:**

**E. Country of Birth:**

**F. Country of Residence:**

**G. Country(ies) of Citizenship:**

**H. Contact Information:** (Please provide full information)

Home Address/City

Telephone/Cellphone

Postal Code

E-mail

1. **Medical, Physical, Dietary or other Personal Considerations: Please** state if you have any existing medical

conditions or are currently taking any prescription medication. This will not affect your selection but will enable the host institution to make any necessary accommodations.

**J. Previous Experience in the United States:** Please list any and all trips you have made to the United States and include approximate dates and the reason for travel.

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| --- | --- | --- | --- |
| **From**  **mm/dd/yyyy** | **To**  **mm/dd/yyyy** | **Places you visited and reason for the trip** | **Type of VISA** |
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**K. Have you participated in or been accepted into a U.S. Department of State sponsored program?**

YES NO

**L. Family Residing in the United States:**

YES NO

If YES (Please list any immediate family members who are currently residing in the United States, including city and state.)

**M. Education, Academic and Professional Training**, including degree earned and fields of specialization

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| **Degree Earned** | **Year Earned**  **mm/dd/yyyy** | **Specialization /Institution** |
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**N. Additional Academic/Professional Training/Workshops** (Add more rows as needed)

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| **Institution** | **Program content** | **Venue and date**  **mm/dd/yyyy** |
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**O. Current Job/Position and Title**

* **Current Institutional Affiliation and complete address**

**P. Work Experience, including previous positions and titles (please limit work experience to the 5 most recent job positions)**

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| **From**  **mm/dd/yyyy** | **To**  **mm/dd/yyyy** | **Title/Institution (Please specify if position is part-time)** |
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**Q. Professional Responsibilities:**

Nominees should 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.

**R. Current Courses Taught:**

If the candidate is 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 the candidate advises students please input the number of students, their level, and hours the candidate spends 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

**S. Publications related to the Institute Theme (in the last 5 years)**

Please list all foreign titles in English, including books, chapter, journal article, newspaper article, web article, etc.

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| --- | --- | --- |
| **Publication Type**  **(specify: Journal Article, Conference/University/Gov’t publication, Book, other)** | **Year**  **mm/dd/yyyy** | **Title/ Publisher** |
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**T. Presentations in International Conferences/Workshops (in the last 5 years)**

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| **Title** | **Organizing Institution** | **Venue**  **mm/dd/yyyy** |
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**U. Active Professional Memberships**

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| **Title** | **Organizing Institution** | **Time**  **mm/dd/yyyy** |
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**Other Leadership Positions Beyond Professional Duties:** Please provide the activity, position/title, year started, year completed, and the description of duties.

**Potential Outcomes:** Please select any likely potential professional outcomes of this program (check all that applies) :

* 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

**V. Evidence of English Fluency** (e.g. personal interview, test score, etc.)

**W. Personal Statement** (provide a 500-word personal statement indicating why you are interested in participating in the program, what you expect to get out of the experience, how will you amplify the impact of the program beyond your research and knowledge, how will you leverage the experience to achieve “other potential outcomes” checked in the above section.)

**X. Are you comfortable with institute housing arrangements and J-1 VISA rules** (2-year home residency), particularly sharing a hotel room with another participant for up to two weeks?

YES NO

**Y. Do you agree with the Program requirements and restrictions?**

YES NO

**Z. Application deadline:** **November 25, 2023**

Please submit your application via e-mail to: [CultureandEducationTirana@state.gov](mailto:CultureandEducationTirana@state.gov)