



The Middle East Partnership Initiative (MEPI)
Student Leaders Program

2010 Application



YOUR NAME _____
(as it appears on your passport) Family First Middle

CONTACT INFORMATION

Permanent mailing address: _____ CPR #: _____
: _____ Mobile telephone: _____
: _____ Home telephone: _____
: _____ E-mail address: _____

PERSONAL INFORMATION

Gender: Male Female Date of Birth: _____
Day / Month / Year
Country of Citizenship: _____ Country of Birth: _____
Country of Residence: _____ City of Birth: _____

ACADEMIC INFORMATION

University Name: _____ Year in University: _____
Major Field: _____ College or University – First Year
(e.g. economics, science, business, English, etc.) (excluding orientation year)
Minor Field: _____ College or University – Second Year
(if applicable) (excluding orientation year)

REFERENCES

Please provide the name of a teacher or professor who has agreed to serve as a reference for your application.

Reference Name: _____ Title: _____
Email address: _____ Mobile Phone: _____