



Caucasus Youth Leadership Program (CYLP)
On-Demand
Youth Entrepreneurship Program 2017
Azerbaijan

Student Application

This Application is free of charge and may be duplicated.

Application Deadline: Wednesday, July 12, 2017

Application Form: Applications will **ONLY** be accepted via the link below. This application template may be used for reference, but **ONLY** online applications will be accepted.

<https://goo.gl/forms/k6sdb6oZ8UbDvgPq2>

Program Description: Secondary school students from Azerbaijan are invited to apply for participation in the Youth Entrepreneurship Program for Azerbaijan and Georgia, the On-Demand Caucasus Youth Leadership Program which will take place **August 28-Sept 23, 2017**. The program will employ a highly interactive approach both in workshops and in a range of public and community settings. Through engagement in the activities of U.S. high schools, community organizations, youth groups, and community leaders in each location, the student and adult participants study challenges facing the U.S. and Azerbaijan-Georgia cross-border region in the 21st century.

The program will be intensive, academic, and highly interactive. **The program sponsors seek energetic applicants from all diversity and disability groups who are ready to develop their skills in order to be effective leaders in their schools and communities.**

Secondary school students who may apply are those who:

- Currently a citizen of Azerbaijan residing in Azerbaijan
- Will be at least 15 years old and not older than 18 years old by August 28, 2017
- Be entering 10th or 11th grades in the fall of 2017

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- Have strong English skills
- Have permission from both parent(s)/guardian(s) and schools to participate in the entire program.

Instructions for completing this application: Please fill out the application as completely as possible, in English. The information you provide on this application will provide the basis for selecting semi-finalists for this program. Answer the questions carefully and completely.

Applications should be submitted online by **July 12**. This application template may be used for reference, but only online applications via the link will be accepted.

Questions regarding the application and selection process should be addressed to BakuEducation@state.gov.

Caucasus Youth Leadership Program: Azerbaijan
Student Application

About you:

Last (Family) Name _____

First Name _____

Male _____ Female _____ How old will you be on August 28, 2017? _____

Birth date: Day _____ Month _____ Year _____

Address _____

City _____

Mobile Phone _____

Email _____

City and Country of Birth _____

Country of citizenship or permanent legal residence _____

Do you have a disability? Y/N

If so, what is your disability?

About your family:

Parent or guardian name(s) _____

Address (if different from yours) _____

Father/Guardian: Mobile Phone _____ Email _____

Mother/Guardian: Mobile Phone _____ Email _____

About your education:

School name/number _____

School City _____

What grade will you enter in fall of 2017? _____ Year you will graduate _____

How many years have you studied English? _____

Do you speak any other languages besides your native language and English? Which ones?

About your academic and community interests:

What academic subjects you are most interested in?

Please describe the activities (extracurricular, community, hobbies) in which you have participated, how long you have been involved with each, any awards or honors. Use additional space as needed. Highlight any experiences with diversity and disability groups.

Future studies and/or possible occupations you've considered: _____

About your Entrepreneurial Interests:

Entrepreneurship is not just starting a business. Entrepreneurship is more like a personality trait. It is more about:

- Trying something new,
- Exploring the unexplored,
- Building things on your own,
- Solving problems and finding solutions.

In what two areas of community engagement or entrepreneurship are you most interested?

Describe a situation in your community where you feel a need or an opportunity for change, describe what is going on, and what outcomes you would most like to achieve both for yourself and those affected (whether or not you can imagine how entrepreneurship might help).

How do you think regional (Caucasus) entrepreneurship initiatives can help your country address a challenge (such as climate change, creating new jobs, or health issues) in the 21st century?

More about you:

Do you have a valid passport? _____

If yes: Issuing Country _____

Passport Number _____ Expiration Date (day/month/year) _____

Have you ever lived and/or studied in the United States or in another country? _____

If yes: Where, when, why? _____

Have you notified your parents that you are applying to this program?

Do they support your participation?

List two people who would recommend you to the program? These can be teachers, school administrators, or youth program organizers. We may contact them about your application.

Recommender 1 Name:

Recommender 1 Title:

Recommender 1 Phone number:

Recommender 1 Email:

Recommender 2 Name:

Recommender 2 Title:

Recommender 2 Phone number:

Recommender 2 Email:

Is there anything else you would like us to know about you?

Applicant signature:

By signing the box below, I confirm all information in this application is accurate and true.

_____ Date _____