

**PROFESSIONAL DEVELOPMENT PROGRAM APPLICATION – SUMMER 2017**  
**APPLICATION DEADLINE - MARCH 24th**

**PERSONAL INFORMATION:**

Name \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_ Other \_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Primary E-Mail: \_\_\_\_\_ Secondary E-mail: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

**EMERGENCY CONTACT PERSON**

Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**PASSPORT INFORMATION:**

Do you have a valid passport? \_\_\_\_ (If not, apply for a passport immediately)

Issuing country: \_\_\_\_\_ Passport number: \_\_\_\_\_

US citizen: Yes/No      Permanent Resident Yes/No      Resident Alien Number: \_\_\_\_\_

**ACCOMODATIONS:**

Do you have any dietary restrictions? \_\_\_\_\_

\_\_\_\_\_

Do you have a medical condition, or disability which requires special accommodations? Please explain:

\_\_\_\_\_

\_\_\_\_\_

The Program Fee includes a double occupancy room. You may request a private room, but you will be responsible for the difference in cost. Please contact the Program Coordinator to arrange this accommodation.

**EDUCATION AND EMPLOYMENT**

Employment Status: Full Time \_\_\_\_ Part Time \_\_\_\_ Other: \_\_\_\_\_

Employer: \_\_\_\_\_ Job Title: \_\_\_\_\_

Are you a Public School teacher? If so, please write down the name of your school & address

\_\_\_\_\_  
\_\_\_\_\_

List all Post-secondary education, dates and degrees:

School	Major	Degree	Date

**OTHER:**

All participants must be cleared medically to travel and must self-enroll in Hostos Student Travel Insurance. (Estimated cost \$29.00). Note that several legal conditions restrict an individual from participation in international programs. These include, but are not limited to, criminal probation, outstanding warrants, unanswered court summons, or inclusion on the DHS no-fly list. If any of these circumstances might apply to you, please submit a statement of explanation.

**PERSONAL ESSAY:**

In a one page personal statement give your reasons for participating in this study abroad program and your goals as well as your expectations for the program. Please indicate any aspects of the History/Culture in which you are particularly interested, i.e., history, health, politics, Arts, language, educational system, etc. Be sure to relate your educational, career and/or personal goals to your plan of study.

I, the undersigned acknowledge that I have read this application and that all statements are correct to the best of my knowledge.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

**Mail Application with \$100.00 non-refundable deposit to:**

**CUNY in the Heights- Hostos Community College  
5030 Broadway, Ground Floor  
New York, NY 10034  
Attention: Natalie Espino, Professional Development Program**

**Contacts:**

Program Coordinator: Natalie Espino, 212-567-7132, [nespino@hostos.cuny.edu](mailto:nespino@hostos.cuny.edu)

Associate Dean for Community Relations: Ana I. Garcia Reyes, [agreyes@hostos.cuny.edu](mailto:agreyes@hostos.cuny.edu)