## Yale Young African Scholars Program

# SUMMER 2014 APPLICATION

Th	ne application deadlin	e is: <b>May 16, 2014</b>					
APPLICANT NAME: FAMILY NAME (SURNAME) BIRTH DATE: GENDER: CITY/REGION/COUNTRY OF RESIDENCE:	SESSION PREFERENC	FIRST/GIVEN NAME CE (CHECK ONE): GHANA	OTHER NAMES ETHIOPIA				
SECONDARY SCHOOL NAME:		Grade Le	VEL:				
PERSONAL INFORMATION							
Name:	EMAIL:						
Phone NUMBER:	Permanent Add	DRESS:					
Сіту:	Region:	Country:					
Primary citizenship:		DUAL CITIZENSHIP:					
Applicant grade level:		Applicant date of birth	I:				
ACADEMIC AREA OF INTEREST:							
SECONDARY SCHOOL NAME:		РНО	NE NUMBER:				
Сіту:	Region	COUNTRY:					
IN WHAT YEAR DO YOU INTEND TO BEGIN	UNIVERSITY?	_					
Parent 1 full name:		Relationship:					
PHONE NUMBER:							
Сіту:	REGION:	Country:					
Is parent 1 living?		OCCUPATION:					
Level of education:							
INCONTRACTOR ACCENTER							
Parent 2 full name:		Relationship:					
Phone NUMBER :	STREET ADI	DRESS:					
Сіту:	REGION:	Country:					
Is parent 2 living?	QQ	OCCUPATION:	Q				
Level of education:							
INSTITUTIONS ATTENDED:	000000	_00000000000000000000000000000000000000					

SESSION PREFERENCE (CIRCLE ONE): GHANA

ETHIOPIA

BIRTH DATE:

Please list Academic awards /honors and dates received:

Please list extracurricular activities and a short description of each:

LANGUAGE SPOKEN: FLUENCY LEVEL (CHECK ONE): NATIVE FLUENT CONVERSATIONAL BEGINNER
1.
2.
3.
4.

SESSION PREFERENCE (CIRCLE ONE): GHANA

ONE-PAGE ESSAY (MAXIMUM 500 WORDS):

Why do you want to be a Yale Young African Scholar? What would you contribute to the Yale Young African Scholars community? How will use the skills gained through this experience in your future?

SESSION PREFERENCE (CIRCLE ONE): GHANA

BIRTH DATE:

#### SHORT-ANSWER QUESTIONS

1) Describe the environment in which you were raised – your family, home, neighborhood or community – and how it has influenced you.

**ETHIOPIA** 

2) WHAT MAKES YOU HAPPY? EXPLAIN.

3) DESCRIBE AN EXPERIENCE THAT HAS HAD A SIGNIFICANT IMPACT ON YOUR LIFE.

**BIRTH DATE:** 

SESSION PREFERENCE (CIRCLE ONE): GHANA

ETHIOPIA

Do you have any school or other disciplinary violation(s)? Please explain:

#### CERTIFICATION

Applicant: By signing below, you declare that the essays you are submitting are your own work and that all the information in your application is, to the best of your knowledge, correct and honestly presented.

By signing below, you also declare that you have spoken with a parent or legal guardian about your application to the Yale Young African Scholars Program and that you have made your parent or legal guardian aware of all relevant aspects of the program, including dates and student responsibilities.

IF ACCEPTED TO THE PROGRAM, YOU ALSO AGREE TO ABIDE BY ALL FEDERAL, STATE, AND LOCAL LAWS AS WELL AS YALE UNIVERSITY AND YALE YOUNG AFRICAN SCHOLARS PROGRAM POLICIES INCLUDING, BUT NOT LIMITED TO, ADHERENCE TO MEETING TIMES, CURFEWS, AND CODES OF CONDUCT.

Any violations may result in immediate dismissal from the program and return transportation expenses will be at student's/parent's expense.

IN PLACE OF YOUR SIGNATURE, PLEASE TYPE YOUR FULL LEGAL NAME:

#### DATE SIGNED:

- My application document has been filled out completely
- My official transcript has been submitted
- My teacher has submitted an evaluation

Applications can be filled out on a computer and then sent as an attachment to african.scholars@yale.edu. Alternatively, applications can be printed out, completed in blue or black pen, and then faxed to +1 (203) 436-2395 or scanned and emailed as an attachment to african.scholars@yale.edu.

Your transcript can also either be faxed to +1 (203) 436-2395 or scanned and emailed as an attachment to african.scholars@yale.edu.

Your teacher may download the teacher's evaluation form his/herself on the YYAS website (www.globalscholars.yale.edu/africa), complete it on the computer, and then return it to us via email to african.scholars@yale.edu. If that is not possible, you should download the form for your teacher, print it, and ask him/her to fill it out and send it to us via fax on +1 (203) 436-2395 or as a scanned document to african.scholars@yale.edu.

## Yale Young African Scholars Program

### SUMMER 2014 STUDENT EVALUATION FORM TO BE COMPLETED BY TEACHER

Applicant Full name:	ME:				Birth Date:					
Gender:										
CITY/REGION/COUTRY O HIGH SCHOOL NAME:	F Resid	ENCE:				G	RADE LEV	<b>DI</b> •		
HIGH SCHOOL NAME.						U	KADE LEV	ЕЦ.		
The purpose of this form strengths and weaknesses. completed by the teacher a	Kindly	give as m	uch detail	as possib	le within t	he limit o	of the allot			
How long have you known										
In what capacity do you kn	now this	student?								
Please rate the student on	the follow	wing:								
	Poor			Average				Excellent		
	1	2	3	4	5	6	7	8	9	10
Leadership										
Punctuality/Attendance										
Creativity										
Academic achievement										
Maturity										
Concern for others										

Motivation

Self-confidence

English language ability

BIRTH DATE:

Please give an example of an instance in which this student exemplified leadership:

Please comment on any contribution this student has made to the school community (extracurricular involvment, academic achievement, etc.)

Are you aware of any disciplinary actions for violations taken against this student? Kindly explain if any.

Please use this space to provide any additional comments about the student

Teacher's	signature
Teacher's	name
Subject	