**Application for “Young Entrepreneurs Professional Exchange Program between Egypt and USA”**

**Funded by the US Department of State and administered by Hands Along the Nile Development Services (HANDS) from the US in cooperation with Coptic Evangelical Organization for Social Services (CEOSS) from Egypt.**

**Phase 2: Training and Networking Visit to the US for Young Egyptian Female Artisan Entrepreneurs.**

The Young Entrepreneurs Professional Exchange Program, funded by the US Department of State, Bureau of Educational and Cultural Exchanges, aims to empower aspiring young women engaged in crafts production related businesses between the ages of 25 and 35 years. We are also looking for participants that are involved with a non-governmental Egyptian organization that is dedicated to advancing economic activities of women engaged in crafts production/businesses. Those who are accepted for this program will travel to the US (Washington DC) in September 2011 , for an 18-day period of training. The selected participants are also expected to attend further programs in Egypt during 2011. They will also be expected to share the information with their colleagues in Egypt in order to broaden the impact of this program. By signing this application form, candidates certify their willingness to fulfill the expectations for active and productive participation in this program.

Please attach **two letters of recommendation** to your application form. If your NGO directly involves production of crafts, please submit a photo of samples. Deadline to apply is June 05, 2011. Please **fill this application form in English language only.**

And the selected candidates will be interviewing during June 14th and 15th 2011

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Applications may be mailed, delivered by hand, or e-mailed to:

**YOUNG Entrepreneurs professional exchange program**

**Coptic Evangelical Organization for Social Services**

**Block 1331 Dr. Ahmed Zaki street, El Nozha El Gedida**

**El Nozha El Gedida**

**E mail**:

To: bassem.sayed@ceoss.org.eg

Cc: exchanges@handsalongthenile.org

Phone: (02) 2622-1425 – OR Mr. Bassem Sayed 0125571565

For further information on program specifics, contact the office above.

APPLICATION FORM (For NGOs)

Please complete with block letters

**PART 1: BASIC INFORMATION**

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

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Permanent Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 street city county

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

 country postal code

Permanent Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male Female

 day/month/year

Place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 city and country

Do you have a valid passport? Yes No

If yes, list the number and expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever traveled or lived anywhere outside Egypt? Yes/No

If yes, please provide a brief description including dates and locations:

How would you describe your **English** skills?

Spoken: Excellent Good Adequate Poor

Written: Excellent Good Adequate Poor

**PART 2: EDUCATION**

Please list any degrees or diplomas earned, name of school, year received

List any additional courses, trainings, certificates

**PART 3: PROFESSIONAL INFORMATION**

Current Organization of Employment: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Is Your Organization Registered with Ministry of Social Responsibility? Yes/No

MOSR Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone/E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

In what year was your organization started? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is the annual budget of your organization? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many people work in your organization? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What percent of your employees are women?\_\_\_\_\_\_ men? \_\_\_\_\_\_\_\_

Please provide a basic description of your organization’s work:

Please describe your job responsibilities:

Please describe what programs/strategies your organization employs to enhance economic activities women engaged in crafts production:

Please describe any obstacles your organization faces when trying to assist women engaged in crafts production:

**PRIOR WORK EXPERIENCE**

Please list any work experience prior to your current business/company of employment, and particularly those that are related to assisting economic activities of women and particularly those related to crafts production:

**ORGANIZATIONAL PLAN**

Please describe your/your organization’s plans in the next two years for activities that would empower young women to engage in business activities. **Please attach a more detailed business plan** listing major steps to be taken and expected achievements, including new job creation.

**PART 4: YOUR PARTICIPATION IN YEP PROGRAM**

Why are you interested in joining this program, and what do you expect to gain from this experience?

Part of this program involves follow-up activities including participation in training activities in Egypt, as well as training of other young businesspeople who were unable to travel with us. Please discuss your commitment to continued participation in the program, as well as to reaching and assisting other community members upon your return.

**ADDITIONAL INFORMATION**

Please describe any volunteer activities or other type of community activities that you have been involved in.

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Please describe your prior interaction (if any) you have had with Americans, and why you are interested in intercultural cooperation.

I agree that all of the information in this application is true, and I agree that if chosen to participate, I will participate in ALL program activities in the United States and Egypt.

I am able to travel independently and will be able to participate in all aspects of this program.

Applicant Signature Date