**benjamin franklin transantlantic**

**FELLOWship application**

The 2025 Benjamin Franklin Transatlantic Fellowship (BFTF) is scheduled to take place in-person from June 24-July 22, 2025 and will be hosted by Purdue University in West Lafayette, Indiana. This is an intensive exchange program, created to foster relationships and promote youth engagement, build leadership skills and allow participants to explore important topics.

Please submit **one copy of the application electronically** to [adviser@fulbright.is](mailto:adviser@fulbright.is). Please type as the subject to the e-mail: *Benjamin Franklin Transatlantic Fellowship application*. **The electronic application must be submitted by midnight on 19 February 2025**.

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| --- | --- |
| **1. NAME** | **Last name:** Click or tap here to enter text.  **First name:** Click or tap here to enter text.  **Middle Name (if on Passport):** Click or tap here to enter text. |
| **2. GENDER** | **Male  Female** |
| **3. ADDRESS** | **Street:** Click or tap here to enter text.  **City:** Click or tap here to enter text.  **Postal Code:** Click or tap here to enter text.  **Country:** Click or tap here to enter text. |
| **4. PLACE OF BIRTH** | **City:** Click or tap here to enter text.  **Country:** Click or tap here to enter text. |
| **5. COUNTRY OF CITIZENSHIP** | Click or tap here to enter text. |
| **6. COUNTRY OF Residence** | Click or tap here to enter text. |
| **7. DATE OF BIRTH (MM/DD/YYYY)** | Click or tap to enter a date. |
| **8. TELEPHONE** | **Home phone**: Click or tap here to enter text.  **Mobile phone**: Click or tap here to enter text. |
| **9. EMAIL ADDRESS** | Click or tap here to enter text. |
| **10. PASSPORT** | **Passport issued (place):** Click or tap here to enter text.  **Passport number:** Click or tap here to enter text. |
| **11. EMERGENCY CONTACT:** | **Name** Click or tap here to enter text.  **Relationship:** Click or tap here to enter text.  **Phone number:** Click or tap here to enter text.  **Email address:** Click or tap here to enter text. |

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| **12. OCCUPATION OF PARENTS** | **Mother:** Click or tap here to enter text.  **Father:** Click or tap here to enter text. |
| **13. NAME OF SCHOOL** | Click or tap here to enter text. |
| **13b. ACADEMIC TRACK (if applicable)**  ***(hér er átt við námsbraut)*** | Click or tap here to enter text. |
| **13c. SCHOOL ADDRESS** | **Street:** Click or tap here to enter text.  **City:** Click or tap here to enter text.  **Zip Code:** Click or tap here to enter text.  **Country:** Click or tap here to enter text. |
| **14. CURRENT YEAR OF STUDIES** | Click or tap here to enter text. |
| **15. EXPECTED GRADUATION DATE** | Click or tap here to enter text. |

**16. Please list and describe all volunteer positions, work experience, awards, memberships in associations or clubs, and leadership positions you have held** **in the box below. Please include dates.**

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| Click or tap here to enter text. |

**17. Please rank your English language proficiency in the following areas:**

Speaking: Fair Good Excellent

Reading: Fair Good Excellent

Writing: Fair Good Excellent

**17b. If you have previously taken an official English language exam (e.g., TOEFL, IELTS), please list the name of the exam, your score and the date when you took the examination.**

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| exam: Click or tap here to enter text. | Date: Click or tap here to enter text. | Score: Click or tap here to enter text. |

**18. Please describe any pre-existing medical conditions or other dietary and personal considerations in the box below. The information you provide will not affect your selection in the program, but will enable the host institution to make any necessary accommodations.**

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| Click or tap here to enter text. |

**19. Have you ever traveled outside of Iceland?  Yes    No**

**19b. If yes, please list all countries:** Click or tap here to enter text.

**20. Have you ever traveled to the United States?  Yes    No**

**20b. If yes, please explain your previous travel experience in the United States in the box below.**

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| Click or tap here to enter text. |

**21. Do you have family residing in the United States?  Yes    No**

**21b. If yes, please specify in the box below**

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| **Relationship:** Click or tap here to enter text.  **City and State:** Click or tap here to enter text. |

**22. Future study or career plans:**

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| Click or tap here to enter text. |

**23. PERSONAL STATEMENT:** The essay should be **written in English, approximately** 250-300 words. Please convey why you are interested in participating in general, why are you an ideal candidate for this program and how will your participation benefit your community. Additionally, include relevant information on your background and/or interests.

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| Click or tap here to enter text. |

**24. DATA INQUIRY: How did you hear about this program? Please specify in the box below (mark all that apply:**

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| **Fulbright Commission website or pamphlet  School  Social Media**  **Friend  Other:** Click or tap here to enter text. |

**25. Applicant´s signature:**

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**26. Signature of legal guardian authorizing the application of a minor (if under 18):**

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**PLEASE REMEMBER TO SUBMIT YOUR APPLICATION AND TRANSCRIPTS**

**BY 19 FEBRUARY 2025.**

**ALSO MAKE SURE THAT YOUR REFERENCE IS SUBMITTED BY THIS DEADLINE.**

Please submit **one copy of the application electronically** to [adviser@fulbright.is](mailto:adviser@fulbright.is). Please type as the subject to the e-mail: *Benjamin Franklin Transatlantic Fellowship application*. The electronic application must be submitted by midnight on 19 February 2025.

**Accompanying documents which must be submitted with the application:**

* Copy of most recent school transcripts (fall semester, if available, and last school year). School transcripts *should be in English and must include your* grade average.

**REFERENCES:** **1 reference must be submitted**. Preferably by a teacher, mentor or other authority figure that can provide information about academic achievements and extracurricular activities. Please supply those who provide references with the appropriate reference forms or direct them to the form on the Fulbright website: [Benjamin Franklin Transatlantic Fellowship](https://fulbright.is/grants-to-the-us/sumarnamskeid/benjamin-franklin-transatlantic-fellowship/)

**When submitting multiple documents, please name the documents as follows:**

* [NAME] – APPLICATION
* [NAME] – SCHOOL TRANSCRIPT (mark 1 and 2, if you are submitting more than one)
* [NAME] – ADDITIONAL MATERIALS\*

*\* If applicable. This may apply to applicants who wish to hand in information on extracurricular activities, as well as awards, acknowledgements, etc.*

*Applicants* ***must be 16 - 18******years old*** *to participate in the Benjamin Franklin Transatlantic Fellowship program. Those who do not turn 16 before the program starts are not eligible. Those who will turn 19 before the end of the program are not eligible. Fellowships are available subject to funding approval.*

**Please note that references are confidential and should not be seen by the applicant. References should be sent electronically by the evaluator directly to** [**adviser@fulbright.is**](mailto:adviser@fulbright.is) **no later than 19 February 2025. References forwarded by the applicant will not be accepted.**