# U.S. Embassy Chisinau, Moldova

**Foreign National Student Intern Program (FNSIP) – Statement of Interest Section 1: Personal Information**

Name:

Address:

Email:

Phone:

**Do you have any relatives that currently work in this U.S. Embassy? Yes** ☐ **No** ☐

**If yes, please provide their name, position title, and the section where they work.**

**Are you a citizen or legal permanent resident of the country where this U.S. Embassy is located? Yes** ☐ **No** ☐

**(If you answered “no”, you are not eligible to participate in the FNSIP.) Section 2: Education**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name and full** | **Dates Attended** | **Did you graduate?** | **Name and Telephone** |
| **address of your current College,** | **From (mm/yyyy) To (mm/yyyy)** | Yes ☐ No ☐ | **Number of Instructor:** |
| **University or Institution** |  | **Major Area of Study:** |  |

How many hours per week are you able to participate in the FNSIP?

What days of the week are you available?

Please list your proposed start and end dates.

**Section 3: Languages**

**Please list the languages that you speak, read and/or write and the level for each language below. Language skills may be tested.**

**Level 1 – Basic;** *Examples - Basic greetings, phrases, and numbers.*

**Level 2 – Limited;** *Examples – Directions, simple questions.*

**Level 3 - Good working knowledge;** *Examples – Conversations about familiar topics, complex documents.*

**Level 4 – Fluent;** *Examples – Infer nuanced meaning from complex documents.*

**Level 5 – Translator;** *Examples – Certified professional translator in this language.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Language** | **Speaking (Provide Level)** | **Reading (Provide Level)** | **Writing (Provide Level)** |
|  |  |  |  |
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**Section 4: Work Experience:**

**Paid and Voluntary – Please list your most current work experience**

|  |  |  |  |
| --- | --- | --- | --- |
| **Job Title**  **Full Time** ☐ **OR Part-Time** ☐ | **From: (mm/yyyy)** | **To: (mm/yyyy)** | **Annual Salary (optional)** |
| **Employer, Address and Phone Number** |  |  |  |
| **Main Duties and Responsibilities:** | | | |
| **Reason for leaving:** | | | |

**Section 5: Reason for wanting to participate in the FNSIP**

Please indicate what internship opportunity of those listed in the announcement most interests you (e.g., Political/Economic, Management, Public Affairs, Office of Defense Cooperation).

Please provide a brief statement to explain why you would like to be considered for the FNSIP and what you hope to achieve during the program that will benefit your current area of study.

**Section 6: DECLARATION**

* I am a current student at a trade school, technical or vocational institute, college, university or other accredited educational institution, and I am in good academic standing.
* I understand that any information I provide may be investigated and that any false statements may be grounds for non-consideration or termination from the FNSIP, if selected.
* I understand that, if I am provisionally selected for the FNSIP, a successful security and medical certification must be completed before I may begin the program.
* I consent to the release of information about my ability and fitness for the FNSIP by employers, schools, law enforcement agencies, and other individuals and organizations to U.S. mission-authorized investigators and personnel.
* I certify that, to the best of my knowledge, all of my statements are true and complete.

Name of Applicant Date

Signature of Applicant