# North American Leadership Institute

### Mexico City, Mexico

NAEIF

## Application Form

NALI LEADERSHIP PRO	OGRAM			JULY	10 – JU	LY 27, 2007
PERSONAL INFORMATION						
Today's Date:						
Last name:	First:					
Middle:		Preferred Name	e:			
College/University/Organization:				Expected Graduation	on Month/Yea	ar:
Date of Birth: (mm/dd/yyyy)	Age: Sex: M F Social Security #:					
Current Street Address:	Apt#/ PO Box#:					
City/Town:	State/Province: Country: Zip/Postal Code:					
Home Phone #:	Alternate Phone (Cell)#:					
Primary Email Address:						
How did you hear about the Instit	ute (please check all that apply a	and list any names):				
Catholic Online Internet	List Serve Professo	or University Admi	inistrator	Family	Friend	Other
List Names:						
Please list any other students you	would like to recommend for th	ne Institute: (please incl	lude area	code)		
Nan	ne	Home Phone #		Ema	il Address:	
1.						
2.						
3.						
4.						
5.						
Can you speak Spanish? If so, how	w well?					
How well do you understand a Spanish speaker?						
Can you speak English? If so, how well?						
How well do you understand an E	nglish speaker?					
Please list your leadership activities (Beginning with the most recent):						
	Activity			Role/Position		Date(s)
Please write about your most rewarding volunteer philanthropic experience. How did it make you a better advocate for human dignity?						

NAME	(Last,	First):
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#### **TRAVEL INFORMATION**

All flights should be scheduled from Friday morning, July 10<sup>th</sup>, and depart on Thursday morning, July 27<sup>th</sup>.

What airport will you be traveling from?

Please list any information that will help us match you with a host family (for example: pet allergies):

#### **IN CASE OF EMERGENCY**

Name of family, friend or relative (preferably parent or guardian):	Relationship to student:	Home phone#: (area code first)	Work phone#: (area code first)
Α.			
В.			
С.			
D.			
Primary physician name:	Physicians phone:		
Hospital/Clinic name:	Hospital phone:		
Please list any food allergies below:	Please list any medical aller	gies below:	

#### **PAYMENT OPTIONS**

Please select one of three payment options (Canadian & U.S. College/University students \$1,995 USD; Mexican University Students \$50 USD):

Credit Card/ Bank	Please visit <u>www.naeif.org/tuition.html</u> . Click the button for 'Payment' and proceed with your credit card, debit card or bank information with PayPal.
Mail in a check or money order to :	North American Educational Initiatives Foundation, Inc. c/o Theodore Wills, President 23 Lenox Street Worcester, MA 01602 USA
Mexican students pay \$50 USD to the university's "Caja":	Tesoreria, Universidad Panamericana

#### MANDATORY PASSPORT PHOTO

Please attach a passport photo (jpg file) with this completed application form. You must have a valid passport to participate in this program.

#### **APPLICATION INSTRUCTIONS**

Email this application form with passport photo to president@naeif.org with subject heading "Application and Photo."

Or mail this application and passport photo to:

North American Educational Initiatives Foundation, Inc. c/o Theodore Wills, President 23 Lenox Street, Worcester, MA 01602 USA

For more information, contact Mr. Ted Wills, President of NAEIF, Inc. via email at president@naeif.org or cell phone at 401-714-7895.

Thank you for applying to the North American Leadership Institute. We are conducting a rolling admissions process and look forward to responding to your application expeditiously.

Revised February 25, 2007