

Excellence

Center for Excellence in Education

CEE ADVISORY and CONSULTANCY

Please provide answers and information that will be used by Joann DiGennaro, President of the Center for Excellence in Education (CEE), for acceptance to the CEE Advisory and Consultancy.

To schedule your interview, please contact:

Maite Ballesterro
Executive Vice President of Programs
Maite@cee.org
00-1-703-448-9062 ext. 235

Or

Maureen Palmer
Public Affairs and Projects Manager
mpalmer@cee.org
00-1-703-448-9062 ext. 224

CEE ADVISORY AND CONSULTANCY

STUDENT PROFILE

(Print or type)

Name: _____
(Last) (First) (Middle) (Known As)

Address: _____
(Number) (Street) (City) (Postal Code) (Country)

Home Phone: _____ Cell Phone: _____
(Include Country Code) (Include Country Code)

Permanent E-mail Address: _____ 2nd E-Mail Address: _____

Indicate Gender: _____ Female _____ Male Grade enrolled (Fall 2015) _____

Citizenship: _____

Student Identification Number: _____

Age: _____ Birth Date (M/D/Y) _____

Name of High School: _____

Full School Address: _____

City: _____ Country: _____ Zip: _____

School Phone Number: _____ School E-mail Address: _____

Principal's/Headmaster's Prefix (Dr./Mr./Mrs./Ms./Miss) _____ Title: _____

Principal's/Headmaster's First Name: _____

Principal's/Headmaster's Last Name: _____

E-Mail Address: _____

School Web Site Address: _____

Please complete the following chart indicating your TOEFL scores.

TOEFL

TEST	Score	Test Date	Test	Score	Test Date
Reading			Listening		
Speaking			Writing		

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Please complete the following charts indicating course work through the end of the 2015-2016 school year and test scores (if applicable).

COURSE LEVEL

Subjects	Regular	Honors	AP	IB	Date Completed/Expected (M/Y)

TESTS

TEST	Score	Test Date	Test	Subject	Score	Test Date
PSAT Math			SAT 1	Math		
PSAT Critical Thinking			SAT 1	Critical Thinking		
PSAT Writing			SAT 1	Writing		
ACT English			SAT II			
ACT Math			SAT II			
ACT Reading			SAT II			
ACT Science			ACT Writing			

Please attach a copy of your official score report(s).

Briefly summarize information on the following:

Educational: _____

Career: _____

Research Experience and Awards, Patents Held, or Publications: _____

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Briefly summarize your extracurricular activities (sports, philanthropy, clubs, leadership, and extracurricular activities)

Science or Math Clubs and Awards: _____

Briefly provide detailed information on the following:

Nations Visited: _____

Languages Spoken: _____

Summer Program Participation: _____

International Events Attended: _____

What is your favorite book? _____

What are your hobbies? _____

What do you do for fun? _____

Other: Is there anything else you would for CEE to know about you?

Details: _____

**CEE ADVISORY AND CONSULTANCY
STUDENT PROFILE**
(Print or type)

Student's Name: _____
(Last) (First) (Middle) (Known As)

FATHER OR MALE GUARDIAN Relationship if not Father: _____

Name: _____
(Mr./Dr./etc.) (Last) (First) (Middle)

Address: _____
(Number) (Street) (City) (Postal Code) (Country)

Home Phone: _____ Work Phone: _____
(Include Country Code) (Include Country Code)

Cell Phone: _____ Permanent E-mail Address: _____
(Include Country Code)

Age: _____ Citizenship: _____

Occupational History:

<u>Position</u>	<u>Firm</u>	<u>Location</u>	<u>Dates</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Educational Background:

<u>Institution</u>	<u>Location</u>	<u>Dates</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic, Professional, or Civic Awards:

<u>Award Bestowed</u>	<u>Location</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____

**CEE ADVISORY AND CONSULTANCY
STUDENT PROFILE**
(Print or type)

Student's Name: _____
(Last) (First) (Middle) (Known As)

MOTHER OR FEMALE GUARDIAN Relationship if not Mother: _____

Name: _____
(Ms./Mrs./Dr./etc.) (Last) (First) (Middle)

Address: _____
(Number) (Street) (City) (Postal Code) (Country)

Home Phone: _____ Work Phone: _____
(Include Country Code) (Include Country Code)

Cell Phone: _____ Permanent E-mail Address: _____
(Include Country Code)

Age: _____ Citizenship: _____

Occupational History:

<u>Position</u>	<u>Firm</u>	<u>Location</u>	<u>Dates</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Educational Background:

<u>Institution</u>	<u>Location</u>	<u>Dates</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Academic, Professional, or Civic Awards:

<u>Award Bestowed</u>	<u>Location</u>	<u>Dates</u>
_____	_____	_____
_____	_____	_____

**CEE ADVISORY AND CONSULTANCY
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SIBLINGS:

Designate as full, half, or step: (f), (h), or (s):

<u>Name</u>	<u>Age</u>	<u>Sex</u>	<u>Education Level/Degrees</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please name another person to contact such as grandparent, aunt, or uncle, in the event CEE cannot make contact with you or your parents.

Name: _____
(Mr. & Mrs./Dr./Mr./Ms.) (Relationship)

Address: _____
(Number) (Street) (City) (Postal Code) (Country)

Home Phone: _____ Business Phone: _____
(Include Country Code) (Include Country Code)

Cell Phone: _____
(Include Country Code)