



VITAL VOICES  
GLOBAL PARTNERSHIP



## Candidate Application

### Personal Information

1) What is your first name/given name(s) as written on your passport?

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2) What is your middle name(s) as written on your passport?

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3) What is your surname/last name/family name(s) as written on your passport?

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4) What is your preferred first/given and middle name(s)?

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5) What is your preferred surname/last name/family name name(s)?

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6) Please complete the following:

City of birth: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_

7) What is your birthday? Please write using the following format: ex. March 29, 1985

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8) Please share the following:

Permanent personal email address: \_\_\_\_\_

Work email address: \_\_\_\_\_

What is your preferred email address:

Work : \_\_\_\_\_

Personal : \_\_\_\_\_

**9) Primary phone number, including country dialing code:**

\_\_\_\_\_

**Mobile phone number, including country dialing code (only if different from above):**

\_\_\_\_\_

**10) Please enter the names of all social media profiles you have:**

Facebook: \_\_\_\_\_

Twitter: \_\_\_\_\_

Instagram: \_\_\_\_\_

LinkedIn: \_\_\_\_\_

Skype: \_\_\_\_\_

Website or Blog: \_\_\_\_\_

**11) What are your interests?** Examples include sports, hobbies, volunteer activities, etc.

\_\_\_\_\_

**12) Do you have any food allergies and/or medical and physical challenges?**

\_\_\_\_\_

Please indicate your answer with an “X” below. If you select “Yes”, please explain in detail.

( ) No

( ) Yes. Please specify: \_\_\_\_\_

**13) This program is an intensive experience, which requires 8-12 hours per day of consistent activities, including long periods of sitting. Do you have any concerns about your ability to attend the programming in full?**

Please indicate your answer with an “X” below. If you select “Yes”, please explain in detail.

( ) No

( ) Yes. Please specify: \_\_\_\_\_

**14) Please provide the contact information of a partner, relative or friend in case of emergency:**

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

Phone Number (including country dialing code): \_\_\_\_\_

Mobile Number (including country dialing code): \_\_\_\_\_

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

Relationship to You: \_\_\_\_\_

**15) Some mentors invite their mentees to stay at their homes during the mentorship. Would you be comfortable with this option?** Please indicate your answer with an “X” below.

( ) No

( ) Yes

**Travel Information**

16) Please list all previous travel to the United States:

Dates:

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

Location(s) Visited:

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

Purpose of Travel:

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

Dates:

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Location(s) Visited:

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Purpose of Travel:

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Dates:

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Location(s) Visited:

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Purpose of Travel:

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**17) Please list previous travel outside of the United States in the last two years:**

Dates:

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Location(s) Visited:

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Purpose of Travel:

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Dates:

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Location(s) Visited:

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Purpose of Travel:

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Dates:

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Location(s) Visited:

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Purpose of Travel:

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**18) Have you participated in any U.S. government program?**

Please indicate your answer with an “X” below. If you select “Yes”, please indicate the name of the program, dates and places visited.

( ) No

( ) Yes. Please specify:

**Educational Information**

**19) Please provide information on your educational background. List your highest degree first, and include significant training programs.**

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## **Work Information**

### **20) Have you ever worked for a Fortune 500 company?**

Please indicate your answer with an “X” below. If you select “Yes”, please specify the name of the company and when you worked with them.

- No
- Yes. Please specify:

### **21) What is the name of your primary business/organization?**

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### **22) What is your job title at your primary business/organization?**

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### **23) In what sector do you mainly work?**

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Please indicate your answer with an “X” below. If you select “Other”, please specify.

- Business/private for-profit sector
- Social enterprise
- NGO/civil society/non-profit sector
- Government/public sector
- Multilateral agency
- Other. Please specify:

### **24) Which of the following best describes your current professional role in your primary business/organization?**

Please indicate your answer with an “X” below. If you select “Other”, please specify.

- Executive (ex: CEO, President, Vice President, etc.)
- Entrepreneur/business owner
- Senior manager
- Mid-level manager
- Professional employee/technical expert
- Other. Please specify:

**25) Please provide a brief overview of the primary business/organization where you work, including the industry/issue-area focus, mission and main products/services.**

Please respond with 1 short paragraph or 200 words maximum.

**26) Are you the founder of this business/organization? (Did you start the business/organization?)**

Please indicate your answer with an “X” below.

- ( ) Yes
- ( ) No

**27) In what year was your business/organization founded?**

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**28) How long have you worked at this business/organization?**

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**29) Please describe your five major roles and responsibilities, including the decision-making authority you have within this business/organization:**

Please respond with 1-3 sentences only per role/responsibility.

Roles/Responsibility 1:

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Roles/Responsibility 2:

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Roles/Responsibility 3:

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Roles/Responsibility 4:

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Roles/Responsibility 5:

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**30) What is the size of your business/organization?**

- 1-10 employees
- 11-50 employees
- 51-100 employees
- 101-500 employees
- 501-1,000 employees
- 1,000+ employees

**31) How many employees do you supervise?**

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**32) What was the total annual revenue of your business / organization's products and/or services in 2018 in USD? If you are not aware of this amount in USD, please visit [www.oanda.com](http://www.oanda.com).**

Please indicate your answer with an "X" below.

- Less than \$25,000 USD
- \$25,000 to \$39,999 USD
- \$40,000-\$59,999 USD
- \$60,000-\$99,999 USD
- \$100,000-\$499,999 USD
- \$500,000-\$1,999,999 USD
- More than \$2,000,000 USD

**33) Do you pay yourself a salary?**

Please indicate your answer with an “X” below.

- Yes
- No

**34) Does your business/organization currently have a business plan and/or strategic plan in place?**

Please indicate your answer with an “X” below.

- No
- Yes
- Not sure

**35) Do you feel that the business and/or strategic plan needs to be improved?**

Please indicate your answer with an “X” below. If you select “Yes”, please specify briefly.

- No
- Yes. If so, how:

**36) Who are your current customers / clients?**

Please check “X” below that all answers that apply. If you select “Other,” please specify.

- Individual consumers / clients
- Businesses
- Governments
- NGOs, nonprofits, or other civil society organizations
- Other. Please specify:

**37) Who are your current competitors?**

Please check “X” below that all answers that apply. If you select “Other,” please specify.

- Individual consumers / clients
- Businesses
- Governments
- NGOs, nonprofits, or other civil society organizations
- Other. Please specify:

**38) What are the top three challenges your business/organization is currently facing?**

Please respond with 1-3 sentences only per challenge.

Challenge 1:

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Challenge 2:

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Challenge 3:

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**39) What are the top three opportunities for growth and/or improvement for your business/organization?**

Please respond with 1-3 sentences only per opportunity.

Opportunity 1:

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Opportunity 2:

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Opportunity 3:

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**40) What vision do you have for your company in the next 1-3 years?**

Please respond with 1 short paragraph or 200 words maximum.

**41) Please provide the website and social media accounts for your business/organization.**

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Please write N/A if your business/organization does not have a website and/or social media accounts.

**42) Please indicate any awards your business/organization has received.**

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**43) Do you have a secondary business/organization?**

Please indicate your answer with an “X” below. If you select “No”, please skip to the next section, question 47.

- ( ) Yes
- ( ) No

**44) What is the official name of your secondary organization/business?**

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**45) What is your official job title at your secondary business/organization?**

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**46) Please share your secondary email address for this business/organization.**

Please write N/A if you do not have one.

**Personal Professional Questions**

**47) Please list any personal professional awards or recognition you have received.**

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**48) Please describe what you believe are your three main personal and professional strengths. For example, good negotiation skills / strong financial skills.**

Please respond with 1-3 sentences only per strength.

Strength 1:

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Strength 2:

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Strength 3:

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**49) Please list or describe briefly up to 3 main personal professional challenges that you currently face. For example, time management.**

Please respond with 1-3 sentences only per challenge.

Challenge 1:

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Challenge 2:

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Challenge 3:

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**50) Please describe your 3 main strengths as a leader. For example, "I am very good at inspiring my employees."**

Please respond with 1-3 sentences only per strength.

Strength 1:

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Strength 2:

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Strength 3:

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**51) Please describe the 3 main challenges you face as a leader. For example, "I am not very good at delegating responsibility to others."**

Please respond with 1-3 sentences only per challenge.

Challenge 1:

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Challenge 2:

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Challenge 3:

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**Goals for the Program**

**52) What are the top three goals that you would like to address during this program? What support (in the form of meetings, trainings and/or connections made) can your mentor company provide during the mentorship to help you achieve these goals?**

For example, if your goal is to improve employee retention, the support needed could be meetings with Human Resources representatives to learn about employee retention best practices.

Please respond with 1-3 sentences only per goal and support needed.

Goal 1: \_\_\_\_\_

Support Needed:

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

Goal 2: \_\_\_\_\_

Support Needed:

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

Goal 3: \_\_\_\_\_

Support Needed:

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

**53) What excites you the most about the potential to participate in this program?**

Please respond with 1 short paragraph or 200 words maximum.

**54) Successful candidates will demonstrate leadership, not only in their companies/organizations, but also in their communities with an established commitment to "paying it forward". How would you utilize the knowledge, skills and connections gained from the program after you return?**

Please respond with 1 short paragraph or 200 words maximum.

**55) Have you ever had a mentor?**

Please indicate your answer with an "X" below. If you select "Yes", please share the details of the nature of your relationship.

No

Yes. Please specify:

**56) Thinking back over the past, please describe how you have sought advice/guidance from others to solve problems and how you applied this guidance. Please share the details of any mentor/mentee relationship you have had and the key outcomes of the experience?**

Please respond with 1 short paragraph or 200 words maximum.

**Additional Question**

**57) How did you hear about this program?**

Please respond with 1-3 sentences only.

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**In addition to a complete application form, please add the following documents:**

1. Current curriculum vitae
2. One recommendation letter
3. Passport Page