# New ICAP Logo

**Application:** International Career Advancement Program, Josef Korbel School of International Studies, University of Denver, 2201 South Gaylord, Denver, Colorado 80208

**ICAP Dates and Deadline:** ICAP 2017 will be held in two parts: an optional introductory session on September 16, 2017, in Washington, DC; and a required week in Aspen, Colorado, from September 30 to October 8, 2017. The application process opens in January and the final deadline for submitting applications is May 15, 2017.

**Completing & Sending Application:** If you or your referees submit hard copies, please mail to the address above. Applications may be sent electronically to [icap@du.edu](mailto:icap@du.edu) with a copy to [Tom.Rowe@du.edu](mailto:Tom.Rowe@du.edu). Letters of recommendation may also be sent electronically directly from the recommender to [icap@du.edu](mailto:icap@du.edu) with a copy to [Tom.Rowe@du.edu](mailto:Tom.Rowe@du.edu). The applicant is responsible for ensuring letters are received from the recommender.

### **Please Note**: There is no application fee. With the exception of some sponsored ICAP Fellows, applicants selected as participants pay their travel expenses to Aspen and a $500 registration fee. Program costs, room and all meals in Aspen are otherwise covered. If an applicant is fully qualified and the *only* reason they are not selected for participation is inadequate ICAP funding, then special consideration will be given to those who are able or whose employers are able to cover all or a portion of the $6,500 per person cost of the program. Please indicate here what portion of the $6,500 cost could be covered if necessary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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| Applicant Biographical Information | | | | | | | | | | | | | | | |
| Last Name  (family name) | |  | | | First |  | | | | | M.I. | |  | Date |  |
| Street Address | | |  | | | | | | | | Apt./Unit# | | |  | |
| City |  | | | | State |  | | | | | ZIP |  | | | |
| Phone (Home) |  | | | | FAX Number | |  | | | | | | | | |
| Phone  (Work) |  | | | | Preferred E-mail | |  | | | | | | | | |
| Marital Status | | |  | Sex | |  | | | Date of Birth | | | |  | | |
| Country of Citizenship | | | | | |  | | | | | | | | | |
| City, State and Country of Birth | | | | | |  | | | | | | | | | |
| If you are *not* a U.S. citizen, are you a permanent resident? | | | | | | YES | | NO | |  | | | | | |
| Ethnic Status **(optional)**  *Please check the appropriate box.* | | | | | | | | | | | | | | | |
| Black/African American | | | | | | Hispanic/Latino | | | | | | | | | |
| American Indian/Alaskan Native | | | | | | Other (specify) | | | | | | | | | |
| Asian/Pacific Islander | | | | | |  | | | | | | | | | |
| **Where did you learn about the International Career Advancement Program (ICAP)?** | | | | | | | | | | | | | | | |
| Former ICAP Participant or Senior Mentor  Name: | | | | | | Email Announcement | | | | | | | | | |
| Internet Advertisement | | | | | | Other (specify) | | | | | | | | | |

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| References | | | | | | | | | | | |
| Please list the names and addresses of two individuals you have asked to provide letters of reference. These should be from individuals familiar with your professional performance who can speak to your capabilities and potential for leadership. Please have these letters sent directly from the recommender to [icap@du.edu](mailto:icap@du.edu) with a copy to [Tom.Rowe@du.edu](mailto:Tom.Rowe@du.edu). | | | | | | | | | | | |
| Name | |  | | | | | Position | |  | | |
| Address | | Email Address | | | | | | | | | |
| Name | |  | | | | | Position | |  | | |
| Address | | Email Address | | | | | | | | | |
| RESUME | | | | | | | | | | | |
| Please include a copy of your CV/resume with this application form. This should include your employment history, education, honors and publications with associated dates. | | | | | | | | | | | |
| Current Employment information | | | | | | | | | | | |
| Employer |  | | | | | Location | |  | | | |
| Position | | |  | | | | | | | | |
| Dates of Service | | |  | | | | | | | | |
| Responsibilities | | | | | | | | | | | |
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| Academic information | | | | | | | | | | | |
| Please list the colleges or universities attended in chronological order. | | | | | | | | | | | |
| Institution | | | | Dates of Attendance | Major Field | | | | | Degree or Diploma | Date Received or Expected | |
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| Community Service, Mentoring and Other Activities Indicating how you assist others | | | | | | | | | | | |
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| Commitment TO DIVERSITY, ICAP AND ICAP ALUMNI | | | | | | | | | | | | |
| Please indicate briefly how you would expect to engage in activities and support a long lasting relationship with ICAP, the ICAP Alumni Association and ICAP alumni following your participation in Aspen. | | | | | | | | | | | | |
| Language skills | | | | | | | | | | | | |
| Language Proficiency Other Than English: Please check the boxes below to characterize your ability.  1 -- Fluency, accuracy, comparable to a native speaker  2 -- Fluency, accuracy, sufficient for social and professional situations  3 -- Able to read writing in one’s field and to exchange ideas (though hesitantly)  4 -- Able to read simple writing with difficulty and to follow simple conversation (but not convey ideas) | | | | | | | | | | | | |
| Language | Reading Ability | | | | Writing Ability | | | | Speaking Ability | | | |
|  | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|  | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|  | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|  | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
|  | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |

**Career Assessment:**

*What are your career goals at this point in time?*

*What are you doing to meet these goals?*

*What career programs or self-assessments have you done in the past?*

*What career topics would you be most interested in learning more about if you were a participant in ICAP?*

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| Statement of Interests and Objectives |
| Please explain, in a **brief** essay, what you feel you have accomplished to this point in your career, what you hope to achieve and the challenges and obstacles you have faced in pursuing your goals. Also indicate how you expect ICAP to contribute to your personal and professional trajectory. Your statement should **not** exceed **300 words**. |
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**ICAP Letter of Recommendation:** International Career Advancement Program, Josef Korbel School of International Studies, University of Denver, 2201 South Gaylord, Denver, Colorado 80208

### **Section 1: This section should be completed by the applicant.**

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| Name of Applicant | | | | | | | | | |
| Last  (or family name) | |  | First |  | | | Middle |  | |
|  | | | | | | | | | |
| applicant Waiver Statement and signature | | | | | | | | | |
| The following waiver statement is provided in accordance with the Family Education Rights and Privacy Act of 1974. You may waive your right to inspect this recommendation by signing the statement at your own discretion. Should you not sign, then you would have access to the recommendation when you enroll in the International Career Advancement Program.  “This is a confidential recommendation and will not be disclosed to me without prior consent of the recommender.” | | | | | | | | |
| Signature |  | | | | Date |  | | | |

### **Section 2: This section should be completed by the recommender.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| REcommender—Recommendation supplied by: | | | | | | |
| Name | |  | Title |  | | |
| Address | Email Address | | | | | |
| Signature | |  | | | Date |  |

|  |  |  |  |  |
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| Recommender: ICAP Letter of Recommendation | | | | |
| *Thank you in advance for providing a letter of recommendation that includes how long you have known the applicant and what you believe to be the applicant's major strengths and leadership potential.* | | | | |
| *In comparison with other individuals you have known at comparable stages in their careers, how would you rate the applicant’s overall qualifications and promise for future leadership?* (Please check one of the following boxes.) | | | | |
| Somewhat Below Average | Average | Somewhat Above Average | Top 25 percent | Top 10 percent |
| Recommender: *Please enclose this form with your letter of recommendation in a sealed* *envelope, sign across the seal and mail by May 15, 2017 to: ICAP, Josef Korbel School of International Studies, University of Denver, 2201 South Gaylord, Denver, CO 80208. Or include this form with your letter of recommendation and send it via email to* [*icap@du.edu*](mailto:icap@du.edu)and copy to [*Tom.Rowe@du.edu*](mailto:Tom.Rowe@du.edu) *by May 15, 2017.* | | | | |



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### **Section 1: This section should be completed by the applicant.**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of Applicant | | | | | | | | | |
| Last  (or family name) | |  | First |  | | | Middle |  | |
|  | | | | | | | | | |
| applicant Waiver Statement and signature | | | | | | | | | |
| The following waiver statement is provided in accordance with the Family Education Rights and Privacy Act of 1974. You may waive your right to inspect this recommendation by signing the statement at your own discretion. Should you not sign, then you would have access to the recommendation when you enroll in the International Career Advancement Program.  “This is a confidential recommendation and will not be disclosed to me without prior consent of the recommender.” | | | | | | | | |
| Signature |  | | | | Date |  | | | |

### **Section 2: This section should be completed by the recommender.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| REcommender—Recommendation supplied by: | | | | | | |
| Name | |  | Title |  | | |
| Address | Email Address | | | | | |
| Signature | |  | | | Date |  |

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| --- | --- | --- | --- | --- |
| Recommender: ICAP Letter of Recommendation | | | | |
| *Thank you in advance for providing a letter of recommendation that includes how long you have known the applicant and what you believe to be the applicant's major strengths and leadership potential.* | | | | |
| *In comparison with other individuals you have known at comparable stages in their careers, how would you rate the applicant’s overall qualifications and promise for future leadership?* (Please check one of the following boxes.) | | | | |
| Somewhat Below Average | Average | Somewhat Above Average | Top 25 percent | Top 10 percent |
| Recommender: *Please enclose this form with your letter of recommendation in a sealed* *envelope, sign across the seal and mail by May 15, 2017 to: ICAP, Josef Korbel School of International Studies, University of Denver, 2201 South Gaylord, Denver, CO 80208. Or include this form with your letter of recommendation and send it via email to* [*icap@du.edu*](mailto:icap@du.edu)and copy to [*Tom.Rowe@du.edu*](mailto:Tom.Rowe@du.edu) *by May 15, 2017.* | | | | |