

InSPIRE Application Instructions and Guidelines

For more information: www.inspire-now.org | For help: info@inspire-now.org

Contents of this Document:

InSPIRE Application Instructions, Guidelines and Checklist	Page 1
InSPIRE Application Part One: Biographical Information	Page 2
InSPIRE Application Part Two: Short Answer and Essay	Page 3
InSPIRE Application Part Three: List of 2 References	Page 4
InSPIRE Application Part Four: Signed Medical Health Questionnaire	Page 5
InSPIRE Application Part Five: Personal Statement	Page 6

Please fill out this application thoroughly and thoughtfully. You will need Microsoft Word to view and fill out this form. Once you have completed the application in its entirety, save the file, then you may print a copy for your records, and send the final version to info@inspire-now.org. Once you have submitted your completed application, you will receive an email notification from us. If you would like to send a university transcript (unofficial) and/or current resume, please do so through email.

The applications are due on **March 18, 2011**. There is no extended application deadline this year. Do keep in mind that this is a rolling admissions process, so if all seats for the 2011 program fill up prior to the March 18th deadline, completed applications received may not be considered. Once all the seats are filled, there will be a notice posted on the website.

Final participants will be notified by **April 8, 2011** of their acceptance into the program. Upon acceptance, final participants will need to send a check or money order payment of \$1475 postmarked by **April 15, 2011** to "InSPIRE Now, LLC" to the address at the bottom of this page.

Your Checklist: A Completed Application Consists of:

- Completed Biographical Information Form (Page 2)
- Essays (Page 3)
- List of 2 References¹ (Page 4)
- Signed Medical Health Questionnaire (Page 5)
- Personal Statement (Page 6)
- University Transcript, if in college (Application Attachment)
- Current Resume (Optional Application Attachment)

¹InSPIRE may contact references and request supplemental materials during the application process.

²Please make check payable to: InSPIRE Now, LLC

Supplemental Materials

InSPIRE will accept supplemental application materials. If you would like to submit any supplemental materials that would allow for the InSPIRE staff to gain more insight into your background and motivation to apply for this program, please send relevant material by email or to the mailing address below.

Application Deadline

March 18, 2011

*Note: We must receive all of your application materials by the deadline date. It is not a 'postmark' date.

Mailing Address

InSPIRE Now, LLC
4663 Amiens Ave.
Fremont, California 94555

Additionally note that no application materials will be returned.

InSPIRE Application, **Part One:** Biographical Information

APPLICANT INFORMATION			
Last Name	First Name	M.I.	Date
Current Street Address		Apartment/Unit #	
City	State	ZIP	
Permanent Street Address (if different)		Apartment/Unit #	
City	State	ZIP	
Current Phone		Current E-mail Address	
Date of Birth (MM/DD/YYYY)	Country of Citizenship	If not a US citizen, state current visa status	
		Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Emergency Contact in your Country of Residence		Phone Number(s)	
Emergency Contact in India		Phone Number(s)	

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Status
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Status
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Status

COMMUNITY INVOLVEMENT (ATTACH ADDITIONAL ORGS/CLUBS ONTO THE BACK OF THIS PAGE)	
List Community and/or Spiritual Organizations, Clubs, and Teams With Which You are/were Involved	Dates of Involvement
1. 2. 3. 4. 5. 6.	1. 2. 3. 4. 5. 6.
Involvement Description	
1. 2. 3. 4. 5. 6.	

Inspire Application, **Part Two:** Short Answer and Essay

SHORT ANSWER	
Have you been to India? YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, when was your last visit?
What was the purpose of your last visit?	South Asian Languages Spoken
1.	2.
Level of Conversational Fluency (Mark one on the following scale)	Level of Conversational Fluency (Mark one on the following scale)
BASIC 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> EXPERT	BASIC 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> EXPERT
What is/was your major in college?	What are your hobbies and interests?
List 3 Adjectives that Best Describe You.	1. 2. 3.

ESSAY (WRITE IN ANSWERS BELOW OR ATTACH ANSWERS TO THE BACK OF THIS PAGE)	
Name one personal quality that you would like to develop. Explain. (50 – 150 words)	
Name one thing that you would like to change about the world. Explain. (50 – 150 words)	

InSPIRE Application, **Part Three:** References

REFERENCE NO. 1		
<i>Please list two references. These references should be able to speak to your character, personality, motivation, and/or previous work. You are not required to send in references/recommendations in addition to this form. References may be contacted upon receipt of application, so be sure to provide current information.</i>		
Full Name	Relationship	
Title		
Street Address		Apartment/Unit #
City	State	ZIP
Current Phone(s)	Current E-mail Address	
REFERENCE NO. 2		
Full Name	Relationship	
Title		
Street Address		Apartment/Unit #
City	State	ZIP
Current Phone(s)	Current E-mail Address	

DISCLAIMER AND SIGNATURE	
I certify that my answers on this application are true and complete to the best of my knowledge.	
If this application leads to my participation in InSPIRE, I understand that false or misleading information in my application or interview may result in my release.	
(Typing your name in the following field indicates your electronic signature and is as binding as a handwritten signature.)	
Signature	Date

InSPIRE Application, **Part Four:** Medical Health Questionnaire

Please answer the following questions by circling yes or no. If you answer yes to any of the questions, attach an additional page describing your condition at greater length. InSPIRE reserves the right to request further information from your doctor/personal physician regarding your medical health. All medical information and personal disclosure will be kept confidential.

APPLICANT INFORMATION					
Last Name	First Name	Age		Gender	
Personal Physician's Name			Physician's Phone Number		

Do you have any medical conditions, such as allergies, a learning disability, heart disease, emphysema, diabetes, seizures, injuries, recent surgery, joint/back problems, etc?

No Yes

Do you have any restrictive conditions, such as impaired vision, hearing, breathing, mobility, etc.?

No Yes

Do you have asthma or any other respiratory ailment?

No Yes

Are you now, or have you ever been, addicted to drugs or alcohol?

No Yes

Do you have any medical, physical, psychological or chronic conditions that prevent you from participating in physical activities?

No Yes

Have you ever been treated for a psychological condition (i.e. mental or emotional instability)?

No Yes

Are you taking any prescription medications under the care of a physician for any of the aforementioned conditions or otherwise?

No Yes

Do you have any special dietary needs or restrictions?

No Yes

Are you currently taking over-the-counter or prescription medicine?

No Yes

Are you unable to swim?

No Yes

If you answered yes to any of the above questions, please attach an additional page describing your condition at greater length.

DISCLAIMER AND SIGNATURE	
I certify that my answers on this medical health questionnaire are true and complete to the best of my knowledge.	
I take full responsibility for my medical, psychological and physical condition for the duration of the five-week exposure program with InSPIRE. I am unaware of any medical, psychological and physical problems that might inhibit my ability to successfully complete this program. Should any problems arise during the course of the program, I will promptly notify the program leaders.	
(Typing your name in the following field indicates your electronic signature and is as binding as a handwritten signature.)	
Signature	Date

InSPIRE Application, **Part Five:**
Personal Statement

PERSONAL STATEMENT: PLEASE ADDRESS WHY YOU WANT TO PARTICIPATE IN INSPIRE AND WHAT EXPERIENCES AND/OR THOUGHT PROCESSES LEAD YOU TO THIS DECISION. ALSO INCLUDE HOW YOU FOUND OUT ABOUT INSPIRE. No more than 600 words.