

📞 Work Phone: [REDACTED]:

📞 Mobile Phone: [REDACTED]:

📞 Home Phone: [REDACTED]:

📧 Work Email Address: [REDACTED]:

📧 Personal Email Address: [REDACTED]:

📧 Preferred Email Address: [REDACTED]:

- Work/ [REDACTED]
- Personal/ [REDACTED]

📍 Work Address: [REDACTED]:

Street Name and Number/

[REDACTED]:

City/ [REDACTED]:

State/Province/ [REDACTED]:

Country/ [REDACTED]:

- Moldova
- Georgia
- Ukraine
- Azerbaijan
- Kyrgyzstan
- Kazakhstan
- Turkmenistan
- Tajikistan
- Uzbekistan

Postal/Zip Code/ [REDACTED]

[REDACTED]:

📍 Home Address: [REDACTED]:

Street Name and Number/

[REDACTED]:

City/ [REDACTED]: _____

State/Province/ [REDACTED]: _____


- Country/ [REDACTED]:
- Moldova
 - Georgia
 - Ukraine
 - Azerbaijan
 - Kyrgyzstan
 - Kazakhstan
 - Turkmenistan
 - Tajikistan
 - Uzbekistan

Postal/Zip Code/ [REDACTED]
[REDACTED]: _____

 Preferred Address: [REDACTED]:

Work / [REDACTED]

Home / [REDACTED]

 Sex/ Gender: [REDACTED]:

Male/ [REDACTED]

Female/ [REDACTED]

 Citizenship: [REDACTED]:

 Other Contact Numbers: [REDACTED]:

 Marital Status: [REDACTED]:

• Single / [REDACTED]

• Married / [REDACTED]

 Spouse Name: [REDACTED]:

 Emergency Contact: [REDACTED]:

 How did you learn about SABIT: [REDACTED] SABIT:

Email / [REDACTED]

Facebook / [REDACTED] Facebook

LinkedIn / [REDACTED] LinkedIn

U.S. Embassy / [REDACTED]

Former SABIT participant - please provide name / [REDACTED] SABIT - [REDACTED], [REDACTED]

Other - please specify / [REDACTED] – [REDACTED], [REDACTED]

Section Two: Education

Educational Entries: Please provide your school name, address, program, dates attended, and type of degree received.

Provide your school name, address, program, dates attended, and type of degree received.

- 1. _____
2. _____
3. _____
4. _____
5. _____

Section Three: U.S. Government-Funded Programs

U.S. Government Programs: List all U.S. Government-funded programs in which you have participated.

List all U.S. Government-funded programs in which you have participated.

Please write "none" if you have not previously participated in a U.S. Government-funded program.

Write "none" if you have not previously participated in a U.S. Government-funded program.

- 1. _____
2. _____
3. _____

Section Four: Knowledge of English

Spoken:

- None /
Some /
Good /

Written:

- None /
Some /
Good /

Section Five: Business and Employment Experience

Employment Entries: Please provide the names of your employers, addresses, your titles, dates of employment, and duties.

Provide the names of your employers, addresses, your titles, dates of employment, and duties.

1. _____
2. _____
3. _____
4. _____
5. _____

Section Six: Passport and Visa Information

Do you have an international passport?

- Yes /
- No /

Passport expiration date:

Please provide in Month/Day/Year format. «/».

Place of Birth City: ():

Place of Birth Country: ():

- Afghanistan
- Albania
- Algeria
- Andorra
- Angola
- Antarctica
- Antigua and Barbuda
- Argentina
- Armenia
- Australia
- ... 170 additional choices hidden ...
- United Kingdom
- United States
- Uruguay
- Uzbekistan
- Vanuatu
- Venezuela
- Vietnam
- Yemen
- Zambia
- Zimbabwe

Have you previously applied for a U.S. Visa?

- Yes /
- No /

When did you apply for a U.S. Visa?

Please provide in Month/Day/Year format. «/».

Where did you apply for a U.S. Visa?

☰ Was the Visa granted? ■■■■ ■■ ■■■■■■■■ ■■■■■■?

- Yes / ■■
- No / ■■■■

🔗 What is the expiration date of your U.S. Visa? ■■■■■■ ■■■■■■■■■■ ■■■■ ■■ ■■■■■■■■■■?

Please provide in Month/Day/Year format. ■■■■■■■■■■■■, ■■■■■■■■■■ ■ ■■■■■■■■■■ «■■■■■/■■■■■/■■■■■».

🔗 What type of Visa were you granted? ■■■■■■ ■■■■ ■■■■ ■■ ■■■■■■■■■■?

☰ Have you ever applied for immigration to the U.S.? ■■■■■■■■■■ ■■ ■■ ■■■■■■-■■■■■ ■■■■■■■■■■ ■■ ■■■■■■■■■■ ■■ ■■■■■■?

- Yes / ■■
- No / ■■■■

🔗 When did you apply for immigration to the U.S.? ■■■■■■ ■■ ■■■■■■■■■■ ■■■■■■■■■■ ■■ ■■■■■■■■■■ ■ ■■■■?

Please provide in Month/Day/Year format. ■■■■■■■■■■■■, ■■■■■■■■■■ ■ ■■■■■■■■■■ «■■■■■/■■■■■/■■■■■».

🔗 Where did you apply for immigration to the U.S.? ■■■■ ■■ ■■■■■■■■■■ ■■■■■■■■■■ ■■ ■■■■■■■■■■ ■ ■■■■?

📄 Travel Entries - List travel abroad for the last 3 years: ■■■■■■■■■■ ■ ■■■■■■■■■■ - ■■■■■■■■■■ ■■■■ ■■■■■■■■■■ ■■ ■■■■■■■■■■ ■■ ■■■■■■■■■■ 3 ■■■■:

1. _____
2. _____
3. _____
4. _____
5. _____

☰ **Section Seven: Company Information** ■■■■■■ ■■■■■■■■■■: ■■■■■■■■■■ ■ ■■■■■■■■■■

🔗 Name of Enterprise: ■■■■■■■■■■ ■■■■■■■■■■:

🔗 Type of Enterprise: ■■■■ ■■■■■■■■■■:

🔗 Product or Service Market: ■■■■■■ ■■■■■■■■■■ ■■■■ ■■■■■■:

4 What specific types of technologies or equipment are you interested in? Please list the type of equipment and the names of U.S. companies you would like to meet with to discuss their product offerings. ■■■■■■ ■■■■■■ ■■■■■■ ■■■■■■■■■■■■ ■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■? ■■■■■■■■■■■■ ■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■, ■■■■■■■■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■, ■■■■■■■■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■.

4 What is the most important thing you want to see or learn by coming on this program? ■■■■ ■■■■■■■■■■ ■■■■■■ ■■■■■■■■■■■■, ■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■, ■■■■■■■■■■■■ ■■■■■■■■■■■■? ■■■■■■■■■■■■ ■■■■■■■■■■■■ ■■■■■■■■■■■■

Public Burden Statement

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with an information collection subject to the requirements of the Paperwork Reduction Act of 1995 unless the information collection has a currently valid OMB Control Number. The approved OMB Control Number for this information collection is 0625-0225. Without this approval, we could not conduct this information collection. Public reporting for this information collection is estimated to be approximately 3 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the information collection. All responses to this information collection are voluntary. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden to the International Trade Administration Paperwork Reduction Act Program: pra@trade.gov or to Katelynn Byers, ITA PRA Process Administrator: Katelynn.Byers@trade.gov.