



## Application for U.S. Embassy Lisbon Nomination

PLEASE FILL OUT, SAVE AND EMAIL ALONG WITH YOUR OTHER ATTACHMENTS TO:  
opalisbon@state.gov

### Personal

Full passport name:\*

First name:\*

Family name:\*

Middle name (if applicable):

Pen name (if applicable):

Date of birth (Month in Letters):\*

Gender:\*

Passport number:

Passport expiration date:

City of birth:\*

Country of birth:\*

Country of citizenship:\*

Country of current residence:\*

Country of permanent residence:\*

Address:\*

Telephone number:

Email address:\*

English language proficiency:\*

Excellent

Good

Poor

Other languages:

## Professional

Occupation:\*

Employer:\*

Other forms of employment  
(if applicable):

Are you currently in the U.S.?*	Yes	No
Have you previously been to the University of Iowa?*	Yes	No
Have you been in the U.S. in J-1 or J-2 status?*	Yes	No
Are you a graduate of a foreign (non-US) medical school?*	Yes	No

## Writing

- Please include, with your application, a literary-based resume or CV, in English (file must be less than **5 MB**)\*
- Please include, with your application, 10-15 pages of poetry or prose translated into English (file must be less than **5 MB**)\*
- Please include, with your application, the original-language text of above translated writing sample here (file must be less than **5 MB**)\*
- Please include, with your application, any additional writing samples here (file must be less than **1 MB**)
- Please include, with your application, any relevant, additional documents (file must be less than **1 MB**)
- Please provide any additional or valuable information related to your writing career or status.

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\*Mandatory