

Participant Biographical Data

1. TO BE COMPLETED BY ICA/IA

SPACE FOR PHOTOGRAPH

Attach photos by paper clip.
Do not staple or glue. Print
your name on back of photos.
Obtain additional for your visa.

DATE RECEIVED

2. DATE SENT

1. ATTACHMENTS

3. FUTURE EMPLOYMENT

(A) GOVERNMENT ☒ PRIVATE ☐

(B) CATEGORY/OCCUPATION

(C) ECONOMIC ACTIVITY

4. PROJECT TITLE

MSU contract

5. PIO NUMBER

6. COUNTRY

Vietnam

7. DESIRED STARTING DATE

N.A.

8. DURATION OF VISIT (Months)

U. S. 12

Third Countries

II. PARTICIPANT'S PERSONAL HISTORY (To be Completed by Participant - See Separate Instruction Sheet)

1. NAME (Last or Surname in Capital Letters)

XUYEN

(First)

Le

(Middle)

Canh

SEX

☒ Male☐ Female

2. ADDRESS (Street)

30 Garibaldi Avenue

(City or Town)

Newark 12, New Jersey, USA

(Country)

3. BIRTH DATE (Day, Month, Year)

September 23, 1933

4. BIRTH PLACE (City & Country)

Chapa, Lachay, Vietnam

5. COUNTRY OF CITIZENSHIP

Vietnam

6. IMMEDIATE FAMILY

HUSBAND OR WIFE

NAME

DATE OF BIRTH

PLACE OF BIRTH

MOTHER

Tran Thi NHUT

Unknown

Thanh Hoa, Vietnam

FATHER

Le Van Ngoan

Unknown

Thanh Hoa

OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)

Le Ngoc San, 1 Jura road, Fribourg, Suisse (Cousin)

8. PERSON IN COUNTRY OF TRAINING TO BE NOTIFIED IN CASE OF EMERGENCY (Name Address and Relationship)

9. HAVE YOU EVER BEEN ABROAD? YES ☒ NO ☐ If yes, complete the following:

COUNTRY	DATES		PURPOSE: (If for Training, Name Sponsor - ICA, UN, etc.)
	FROM	TO	
France	1951	1953	Study tours
U.S.A.	1953	present	Study tours

10. HAVE YOU EVER APPLIED FOR ANY OTHER TRAINING OR EDUCATIONAL PROGRAMS ABROAD?

YES ☐NO ☒

DATE OF APPLICATION:

SPONSOR (ICA, UN, ETC.)

11. (A) LIST MEMBERSHIP IN EDUCATIONAL, PROFESSIONAL, AGRICULTURAL, LABOR OR OTHER ORGANIZATIONS

None

(B) ARE YOU AN OFFICER IN ANY ORGANIZATION? YES ☐ NO ☒ IF YES, SPECIFY:

12. EDUCATION: TOTAL YEARS SCHOOLING LIST BELOW ALL SCHOOLS AND INSTITUTIONS (EXCEPT PRIMARY). ALSO LIST COMPLETED APPRENTICESHIP.

SCHOOLS ATTENDED	TYPE	COURSE OF STUDY OR MAJOR	DEGREES, DIPLOMAS OR CERTIFICATES	DATES	
				FROM	TO
Carrol College		Economics		1953	1954
Montana State University		Economics	B.A. - M.A.	1954	1955
				1957	1958
Columbia University		Economics		1958	date

BIOGRAPHICAL DATA ON PARTICIPANT

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NAME OF PARTICIPANT Le Cami TUYEN	DATE OF BIRTH 9-23-1933	COUNTRY Vietnam	NO. 102
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13. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION Free lance Translator		DATES EMPLOYED FROM: TO: PRESENT TIME	
PRESENT EMPLOYER (FIRM, GOVERNMENT AGENCY, ETC.) NAME AND ADDRESS Self-employed		EMPLOYERS SUPERVISED BY YOU: NUMBER: KIND:	
BUSINESS OR ORGANIZATION	SIZE (Approximate number of Employees or Volume of Business)	KIND (Foundry, Milk Marketing, Vocational Education, etc)	MACHINES OPERATED
DESCRIPTION OF YOUR DUTIES			

(B) WHAT ADDITIONAL DUTIES WILL YOU HAVE UPON YOUR RETURN? IF YOU ARE TO HAVE A NEW POSITION, HOW WILL IT DIFFER FROM YOUR PRESENT JOB?

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION Instructor		DATES EMPLOYED FROM: 1955 TO: 1957	
EMPLOYER (FIRM, GOVERNMENT AGENCY, ETC.) NAME AND ADDRESS Army Language School, Monterey, California		EMPLOYEES SUPERVISED BY YOU NUMBER: KIND: Students	
BUSINESS OR ORGANIZATION	SIZE (Approximate Number of Employees or Volume of Business)	KIND (Foundry, Milk Marketing, Vocational Education, etc)	MACHINES OPERATED
DESCRIPTION OF YOUR DUTIES			

Teaching Vietnamese, writing text books, films' dubbing.

14. SPECIAL KNOWLEDGE, SKILLS, QUALIFICATIONS, ETC. (LIST LABORATORY COURSES, LICENSES, HONORS, PATENTS, PUBLICATIONS, ETC.)

None

15. AVOCATIONAL INTEREST (HOBBIES, SPORTS, ETC.)

Music

16. (SIGNATURE)-READ CAREFULLY

BEFORE SIGNING THIS FORM CHECK BACK OVER IT TO MAKE SURE THAT YOU HAVE ANSWERED ALL QUESTIONS CORRECTLY.

I CERTIFY that I have reviewed the statements made in this application, and that they are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I further agree that if I am accepted under this program, I will follow diligently the program arranged as requested by my government and will not seek extension of the period of my program. I further agree that upon completion of my training, I will return to my country without delay and will endeavor to utilize, for the benefit of my country, the training acquired under this program.

April 22, 1961

SIGNATURE OF PARTICIPANT

DATE

BIOMETRIC DATA AND IDENTIFICATION

NAME OF PARTICIPANT

Le Canh HIE XUYEN

DATE OF BIRTH

9-23-1933

COUNTRY

Vietnam

17. ADDITIONAL INFORMATION: Use this space to continue answers to any blocks on pages 1 and 2 for which sufficient space was not provided. Give number of the block(s) completed.

III. FOR USOM USE

(To be completed after participant has completed PART II above.)

18. ENGLISH LANGUAGE CERTIFICATION

1. AULC TEST: GIVEN ☐ NOT YET GIVEN ☐ WAIVED ☒

A. IF "GIVEN", INDICATE TEST FORM USED _____ (A, B, C, etc.). SCORE: WRITTEN _____ ORAL _____

IS RETEST NECESSARY ☐ YES ☐ NO. INDICATE APPROXIMATE DATE TEST RESULTS TO BE REPORTED _____

B. IF "NOT YET GIVEN", INDICATE APPROXIMATE DATE TEST RESULTS TO BE REPORTED _____

C. IF "WAIVED" INDICATE REASON not studying in the U.S.

D. IF ENGLISH LANGUAGE TRAINING TO BE GIVEN: ☐ In Home Country (Approximate Length) _____

☐ Refresher Training in U.S. (Approximate Length) _____

2. COMMENTS (Expansion of item 1 above and/or supplementary information).

19. OTHER LANGUAGE PROFICIENCY (IF NEEDED FOR THIRD COUNTRY TRAINING) (Indicate competence e. g. fair, good, etc.)

LANGUAGE	WRITING	READING	SPEAKING	UNDERSTANDING

20. DEGREE EQUIVALENT: GIVE U. S. EQUIVALENT OF HIGHEST DEGREE IN BLOCK 12 (BA, BS, MS, PHD, etc.)

EGSE ☐

Training Officer

OFFICIAL TITLE

SIGNATURE OF OFFICIAL

July 13, 1961

DATE

ICA-13-91 (9-59)

NOTE USOM: Forward to each Country of Training copies required by Manual Order 1313.2