



## SABIT

Special American Business Internship Training Program  
A Program of the U.S. Department of Commerce, funded by USAID

### PACKAGING & MARKETING PROGRAM FOR PAKISTAN September 21 – October 4, 2017

The U.S. Department of Commerce's Office of South Asia (OSA) and its Special American Business Internship Training Program (SABIT) have established a program to train up to 20 packaging and marketing professionals from Pakistan. SABIT has successfully trained over 6,000 executives and scientists from South Asia, Eurasia, Northern Ireland, Latin America, Africa and the Middle East. SABIT provides trainees the opportunity to become familiar with a U.S. industry sector and its regulations, establish valuable business relationships, learn about innovative technologies, equipment, and services, and come to understand market-based business concepts.

The program will be two weeks in length, with one week of training which may include sessions on policy, legislation, standards, certification, business plan development, cross-cultural negotiations and management for global business. The program will also have site visits and a visit to a trade show.

This program is designed for specialists in the packaging industry and will have a focus on marketing as well as materials. Applicants for this SABIT program must be in positions of significant responsibility in their employing organizations and have several years of industry experience to be considered for participation. **The program will be conducted in English. Fluency in English is required.**

Applications must be accompanied by a letter from the candidate's supervisor in his or her employing organization which contains the following: A description of the Applicant's present duties and permission for the Applicant to participate in the program. Applicants should also enclose a recent photograph, passport-size if possible. **There are no fees of any kind associated with this application. There is no cost for applying, processing the application, or being selected to participate in the program.**

Applicants are screened and selected by the U.S. Department of Commerce based on their professional and educational achievements and experience in specific industrial sectors. SABIT and the OSA Washington offices will make final determinations regarding which applicants are selected for training.

For those selected to participate in this program, the U.S. Government will pay for round-trip, economy class airfare from a designated site in Pakistan (Islamabad, Karachi, or Lahore) or a neighboring country to the United States, lodging while on the program in the United States, a comprehensive training program,

emergency medical insurance, and a stipend to defray the costs of meals and incidental expenses. Each participant must provide his or her own transportation to the designated departure site and possess a valid international passport on which to travel. Each participant will travel on a U.S. visa, which prohibits the receipt of a salary or honorarium. Participants are responsible for the cost of the U.S. visa. SABIT participants may not seek permanent employment in the United States. Participants may not be accompanied by their families. **Upon completion of their training, participants must immediately return to Pakistan with the delegation. Participants may not extend their stay in the United States after the training.**

Any material misrepresentation on the part of the Applicant, either orally or in writing, will automatically be grounds for disqualification or expulsion from the program whether the participant is already selected or in the United States.

Please be advised that the SABIT program will conduct a due diligence review of both you and your company via several different means, which may include web searches, credit bureau reporting agency searches, through the Office of Foreign Assets Control at the U.S. Department of Treasury, and other sources. If there are any sanctions against you or your company or if there are any legal or ethical concerns found, you will not be considered for the program. If you have already been invited, your invitation may be revoked or you may be terminated from the program if you are already in the United States. This review is directed only at serious matters involving U.S. government sanctions, or serious legal or ethics issues, and has resulted in adverse action by the SABIT program only very rarely.

**APPLICATIONS MUST BE RECEIVED NO LATER THAN JUNE 15, 2017.**

Completed applications should be scanned and emailed to [sabit@trade.gov](mailto:sabit@trade.gov), preferably in a .pdf format.

For questions, please contact Tracy Rollins at the above email address or at 202.482.0073 during the hours of 09:00 to 16:30 Eastern Standard Time (UTC-5).

**PLEASE READ ALL INSTRUCTIONS BEFORE STARTING THE APPLICATION:**

- The **Application** should be completed electronically. Answer all of the questions. If you need more room for answers, please attach another page. If you don't have an answer to a question, please write N/A (Not Applicable). *Phone numbers should include the country code, city code and the telephone number.*
- **All of the documents, the application form, the reference letter and a copy of the applicant's passport MUST be emailed in ONE .pdf file. Applications sent in multiple .jpg files or other formats will NOT be considered.**
- **Please attach Curriculum Vitae (résumé)** –This should be no longer than one page.
- Please provide a **recommendation letter**. The letter should be on company letterhead from your supervisor. It should include permission to participate on the program and should list the dates: September 21 – October 4, 2017. It must be signed.
- Please provide a copy of your passport. If you already have a U.S. visa, please provide a copy of that as well.

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*Please place photo above*

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**I. GENERAL INFORMATION**

**Name\*** \_\_\_\_\_  
(Surname) (Given Name) (Middle Name)

*\*Use the format and spelling as found in your passport.*

**Place of Employment** \_\_\_\_\_  
(Complete Company Name)

**Position/Title:** \_\_\_\_\_

**Work Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Mobile Telephone:** \_\_\_\_\_

**Work Address:** \_\_\_\_\_  
(Street, Building, City, Mail Code)

**E-mail\*:** \_\_\_\_\_ **Website:** \_\_\_\_\_

*\*Please use an email address that you check regularly.*

**Home Address:** \_\_\_\_\_  
(Street Name and Number) (Apartment Number) (City, Mail Code)

**Home Telephone:** \_\_\_\_\_

**Preferred Mailing Address:**                      **Home**                      **Work**

**Date of Birth:** (Month/Day/Year)                      ( \_\_\_\_\_ )  
(Birthday written out with month)

Sex: Female Male

Marital Status: Single Married

Place of Birth: \_\_\_\_\_  
(City) (Country)

Citizenship: \_\_\_\_\_

Full Name of Spouse: \_\_\_\_\_

Spouse's place of work, position, and telephone number:

**Other contact numbers where you can be reached (please list alternative telephones and fax numbers including city codes):**

Tel.: \_\_\_\_\_ Fax: \_\_\_\_\_ Name: \_\_\_\_\_

Relationship: Friend Co-worker Spouse Relative Other

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**In case of emergency, whom should we contact? (Include name, address and telephone number):**

**How did you learn about this program? Please be specific, that is, don't just say "Internet" but list the website, don't just say a colleague, but please name the colleague:**

**II. EDUCATION**

**A. List all post-secondary education including professional education, beginning with most recent (attach additional pages as needed):**

<u>Dates</u>	<u>Institute/University</u>	<u>Major Subject</u>	<u>Degree/Date Received</u>

**B. List all U.S. Government-funded programs in which you have participated (attach additional pages as needed):**

<u>Dates</u>	<u>Name of U.S. Government Sponsoring Agency</u>	<u>Topic of Program</u>

**C. List the languages you know, in addition to English, and rate your fluency:**


**III. BUSINESS AND EMPLOYMENT EXPERIENCE**

**A. List your business and employment history for the past ten years, beginning with most recent:**

<u>Dates</u>	<u>Name of Organization</u>	<u>City</u>	<u>Position/Title</u>	<u>Responsibilities and Duties</u>

**B. Please list three professional references (names, addresses and phone numbers):**

Name	Company name, Email Address, and Telephone Number	Professional Relationship
1.		
2.		
3.		

**IV. ADDITIONAL INFORMATION**

**A. Passport and Travel Information:**

*You must have a valid international passport to participate in this program.*

Passport Series/Number:

Passport Expiration Date:

Have you ever applied for a U.S. visa?                      Yes                      No

When/Where:

Were you granted a U.S. visa?                      Yes                      No                      what type?

Have you ever applied for immigration to the United States?                      Yes                      No

When/Where:

**B. List previous travel abroad (attach additional pages as needed):**

<u>Country</u>	<u>Dates</u>	<u>Sponsor</u>	<u>Purpose</u>

***This information is not intended to disqualify you for participation, but to allow us to accommodate your needs if you are selected.***

- Do you have any allergies?                      Yes                      No

If yes, please explain:

- Do you have any medical conditions or limitations?                      Yes                      No

If yes, please explain:

- Do you take any medication?                      Yes                      No

If yes, please explain:

- Do you have any special dietary needs?                      Yes                      No

If yes, please explain:

- Please list any contacts you have in the United States (including family, friends, business associates, and acquaintances):



**V. STATEMENTS OF PURPOSE**

**The following information is important to create a comprehensive program. Please provide as much information as possible.**

**A. Current enterprise description:**

Name of enterprise:

Type of enterprise (i.e. industry sector: types of goods or services provided):

The market for your product or service is:

Local

National

Regional

International (please list countries) \_\_\_\_\_

Who are your customers?

State enterprises

Individuals

Private enterprises

Other

How many people work at the firm/organization?

Annual gross revenue (in USD):

Ownership of your company:

If it is owned by more than one entity or individual, please provide the ownership breakdown by percentage:

If your organization is an educational institution, please describe the faculties (departments), types of degrees offered.

**B. Please answer the following questions.**

1. Describe your present employing organization (please be specific in terms of private or public sector, the date it was formed, what the mission and goals are, what areas of work it is involved in, how it is structured and /or types of goods and services it provides). *What does your company make/design/do?*

2. Please give a description of your specific responsibilities in the organization. This must include: your title; the name and title of the person whom you work; the name of the division or department for which you work; and its major function within the enterprise; how many employees report to you directly; some of the major problems you have encountered in your work and how you think this program might assist you with those problems; and, any other information you think would be of interest. *What do you do?*

**3. Describe your short- and long-term career goals.**

**4. Describe your goals in coming to the United States for a training program.**

5. How do you plan to apply the knowledge you will gain on the SABIT training program to your work back home -- both in your company and the country as a whole? *What makes you a good candidate for this program?*

**C. Please rank each topic from 1 – 3 according to your professional needs and requirements. Please rank each topic carefully as this will determine program content and structure.**

**Ranking:**

- 1 – Very important
- 2 – Somewhat important
- 3 – Not important or not applicable

**General Packaging Topics:**

Packaging for pharmaceutical and medical devices

Packaging for food products

Packaging for beverages

Packaging for consumer goods

Packaging for industrial/commercial goods

Other (please describe \_\_\_\_\_)

**Materials:**

Glass

Plastics

Solid Container Technology

Labeling

Packaging films: PVC/EVC, OPP, permeable films

Bioplastics

Flexible packaging

Packaging material supply

Packaging equipment

Shipping

Handling, Storage and Transport

Packaging distribution and logistics within supply chains

Other (please describe \_\_\_\_\_)

**Packaging Technology Topics:**

**Label performance and compliance**

**3D Printing**

**Virtual design of packaging systems**

**IT applications**

**Barcodes**

**RFID**

**Auto ID systems**

**Environmental Concerns:**

**Sustainable packaging materials, concepts, and methodology**

**Evaluation of sustainable materials by Life-Cycle Assessment (LCA), bio-degradability, recyclability**

**Marketing and Business Topics:**

**New product development**

**Branding**

**Product displays**

**Evaluating packaging interactions with the consumer**

**Distributor and wholesale networks**

**Accounting practices and financial management**

**Business planning**

**Government Oversight and Regulation:**

**Federal, state, and local regulation of the industry**

**Federal Regulatory Authorities/FDA, USDA**

**Industry standards (ISO, HACCP)**

**Industry associations and organizations**

**Lobbying**

**Please list the products that your facility currently produces and packages, and how much (in tons or liters) you produce each year.**

**Please list the products that you would like to package in the future.**

**What specific types of technologies and equipment are you interested in seeing during your program in the United States?**

**List any other topics or areas that you would like your training to cover.**

**List American organizations you would like to visit.**



**LETTER OF AGREEMENT (Please check each paragraph once you have read and agreed to the terms):**

I testify that the information submitted in this application is complete and accurate. I understand that providing false information on this application or during the interview will automatically disqualify me from participation in the SABIT Program. If I am selected for participation in the program, and it is determined during the course of the training that any of the information provided in this application or during the interview was false, I understand that this would mean immediate dismissal from the program.

If selected, I agree to comply with all regulations of the program and all local and national laws of the United States.

I understand that the U.S. visa obtained in connection with my SABIT program training is valid only for temporary training and is not valid for employment in the United States or for travel not related to the SABIT training both during and after the program. I understand that this program prohibits spouse and/or children to accompany SABIT participants to the United States.

I understand that the program will be conducted in English.

I understand that I will be provided with medical insurance to be used only for emergency situations and not for routine medical care or treatment for any pre-existing medical or dental condition. I further understand that I will be required to pay all deductibles and other miscellaneous expenses not covered by the insurance. I understand that I may purchase my own travel and/or health insurance before departing for the United States. If I choose to do so, this will act as additional coverage for me while I am on the SABIT Program.

The program will make every attempt to provide me with a single hotel room, but there may be circumstances when single rooms are not available. Therefore, based on availability, I may be required to share my hotel room with one other individual from the training group (of the same gender). In such a case, I understand that separate beds will be provided. I declare that this type of housing arrangement is satisfactory to me and presents no difficulties.

I declare my intent to return to Pakistan with the SABIT delegation at the end of my training as a SABIT program participant. I understand that returning to my country at the end of my internship is a condition of my participation in the SABIT program. I further understand that traveling outside of the United States (for example, Canada or Mexico) is strictly prohibited and would be in violation of my U.S. visa and would mean immediate dismissal from the program. Travel to cities in the United States that are not part of the specific SABIT training program is strictly prohibited.

If for any reason I must return home early, I understand that I must return the remainder of the stipend to the SABIT Program.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)