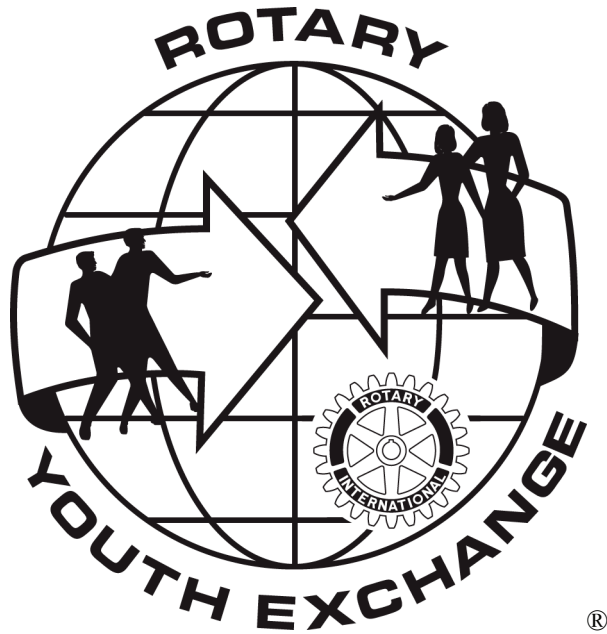

Rotary Youth Exchange Long-Term Program Application



Submit completed application to:

Instructions for Rotary Youth Exchange Program Application

Read all directions on each page carefully **before** completing the application. Use the checklist on the inside back cover to ensure that you have completed all sections and obtained all necessary signatures.

If you are accepted as an exchange student, this application will be sent to your host country and will serve as your introduction to the people who are being asked to host you.

Components of Your Application

Your application consists of:

- All forms in this application
- Copy of your passport or birth certificate
- Copy of your school transcript

Filling Out Your Application

Your application **must be legible**. **Typed or computer-generated applications are strongly preferred**. Answer all questions completely and as asked (*do not* write “same,” “see above,” or “see page ___”). Enter your information directly onto the application unless directed otherwise. Make sure to use correct grammar and spelling.

Wherever the application asks for your full legal name, enter your name **exactly as it appears on your passport or birth certificate**. On pages that have a box in the upper right-hand corner marked “Applicant Name,” enter your preferred form of your name. For example, an applicant whose full legal name is Joseph David Smith might enter *Joseph Smith* or *Joe Smith*.

Making Photocopies and Signing Forms

You will need to submit four complete sets (**your original plus three photocopies**) of this application. (You may also wish to make an additional set for your own records.) Sets 2-4 can be good-quality photocopies. **All signatures on all sets must be signed in BLUE ink**. To accomplish this:

1. Complete the application form. Do not sign it.
2. Make three good-quality photocopies of the completed application.
3. Sign all four sets yourself, then have your parents/legal guardians sign all sets.
4. Medical and dental forms: Ask your physician and dentist to make three copies of the completed medical/dental form *before* signing it and then to sign each copy in blue ink. (It’s a good idea to include a blue pen when you give them the form.)

All attached photographs must be **originals** or **good-quality color copies**.

Questions?

If you have any questions about completing this application, check with your school counselor or your local Rotary club’s Youth Exchange officer. Once you’ve completed your application, return it to your local Rotary club/district as they’ve instructed.

District _____ : Attach any additional instructions. If none, please check here:

Statement of Conduct for Working with Youth

Rotary International is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, Rotarians’ spouses, partners, and other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

Adopted by the Rotary International Board of Directors, November 2002



District _____
Long-Term Exchange Program

Personal Information

Before you begin your application, please read all instructions on the opposite page.

Smile!

Attach a recent, good-quality color photo of yourself (head and shoulders). Original photos or color copies must accompany all four sets of the application.
 Size: 2 x 2½ in. (5 x 6.5 cm)

1. Applicant Information

Full Legal Name as it appears on passport or birth certificate (use all capital letters for your FAMILY name)		Preferred Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Home Address — Street			
City	State/Province	Postal Code	Country
Postal Address (if different) — Street			
City	State/Province	Postal Code	Country
Home Phone	Mobile Phone	E-mail	
Date of Birth (e.g., 01/Jan/1999)	Place of Birth (City, State/Province, Country)		Citizen of (Country)

2. Parent/Legal Guardian Information

Full Name of Father/Legal Guardian				Full Name of Mother/Legal Guardian			
Address — Street				Address — Street			
City	State/Prov.	Postal Code	Country	City	State/Prov.	Postal Code	Country
E-mail				E-mail			
Home Phone		Mobile Phone		Home Phone		Mobile Phone	
Occupation				Occupation			
Business Phone		Fax		Business Phone		Fax	
Rotarian? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of Rotary club:				Rotarian? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, name of Rotary club:			

Check here if your parents are divorced or separated. Authorizations should be obtained from **all** parents/legal guardians and others who have legal rights to decisions affecting the student's participation.

Parent/legal guardian to contact first in the event of an emergency:

3. Siblings (add pages as necessary)

Name	Gender	Age	Occupation	Living at Home
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No

Applicant Name	
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4. Personal Background

a. Do you have any dietary restrictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please explain (e.g., vegetarian, food allergies):
b. Do you smoke?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes for 4b, 4c, or 4d, please explain:
c. Do you drink alcohol?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Have you ever been involved with illegal drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Answering yes will not automatically eliminate you as a candidate; however, it may require special consideration of host family assignments.

5. Secondary School Information

Name of Secondary School you currently attend	<i>Attach a transcript of secondary school courses you have completed and the grades you received in the last completed year of school. The transcript must be in English.</i>		
Address — Street			
City	State/Province	Postal Code	Country
Phone	Fax	E-mail	
Number of grades/levels at your school	Year you will finish secondary school	Years of school attended	

6. Languages

Native Language:				
Non-native Language(s)	Years Studied	Proficiency (indicate Poor, Fair, Good, or Fluent)		
		Speaking	Reading	Writing

7. Sponsor District and Club Contacts

Name of Sponsor District Youth Exchange Chair				Name of Sponsor Club Youth Exchange Officer			
Address — Street				Address — Street			
City	State/Province	Postal Code	Country	City	State/Province	Postal Code	Country
Home Phone		Mobile Phone		Home Phone		Mobile Phone	
Business Phone		Fax		Business Phone		Fax	
E-mail				E-mail			