

**DISTRICT 5960 GROUP CULTURAL EXCHANGE**

**TEAM MEMBER APPLICATION**

**2017-2018 Rotary Cultural Exchange with District 2490- ISRAEL**

*The completed application must be submitted to Rob Howard, District GCE Chair a****t*** [***rhoward@popearch.com***](mailto:rhoward@popearch.com)***.*** *Or by mailing to* **Rotary District Office 5960- 2233 Hamline Avenue North, Suite 620-Roseville, MN 5511***3. Please submit an $50.00 deposit with the application. Deadline for submission* ***is December 4, 2017***

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*Name in full (as it appears on your passport)*

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Passport (Country of Origin) : Passport expiration Place of Birth

\_\_\_\_\_\_Male \_\_\_\_\_Female Date of Birth: \_\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ Age:\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Work Phone Mobile Phone Email

Home Address: Street City State Zip Code

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Main Spoken Language Additional Languages (reading-writing-speaking

Allergies (Include Food) Dietary or Medical Needs

Physical Limitations

Country of Citizenship:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Person to Notify in case of an emergency:**

Name Relationship Telephone

Address Email

**D5960 GCE Team Member Application October 2017**

**Occupation/Profession\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Rotary Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Years in Rotary\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Club or District Committee Experience\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Offices Held in Rotary (dates)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Leadership experience:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Community Involvement:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Travel/International Experience:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Language Skills (Particularly relative to host district)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Physical Health\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional Information you want to share: (Hobbies, Interests) Use additional pages if necessary.**

**D5960 GCE Team Member Application October 2017**

**TEAM MEMBER APPLICANT’S COMMITMENT**

**Attached to this Team Member Application is the Team Member’s Participation Agreement containing obligations and responsibilities to which you must agree should you be selected as a Team Member. The Agreement must be signed and submitted with this application in order for you to be considered for this appointment.**

**In addition to the items found under the Team Member’s Agreement the following items are specific to the position of Team Member.**

**If appointed as Group Cultural Exchange team member, I will accept the appointment and agree to discharge the following obligations and responsibilities.**

1. **I will accept the decisions and directives of the Team Leader at all times.**
2. **Following the Exchange, I will become active with the District’s GCE program and committee..**
3. **I will follow the Four Way Test when representing Rotary.**
4. **I agree to notify the committee of any potentials conflicts of interest that may arise with my application as a team member.**

**APPLICANT SIGNATURE DATE**

**D5960 GCE Team Member Application October 2017**

**Rotary Club Endorsement**

The Rotary Club of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_proposes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to the Group Cultural Exchange interviewing committee for consideration as a member of the District GCE team. The Rotarian is a member in good standing with Rotary. The non-Rotarian has been invited to be a guest at a Club meeting (s) . If the applicant is appointed to the team, the club will support the team member to gain understanding of Rotary and the projects of the sponsoring club.

Club President’s Name (please print) Signature Date

**D5960 GCE Team Member Application October 2017**