

**2018 Application**

 **Short Term Youth Exchange**



**District 7470 and District 2670**

 Short Term Youth Exchange

**Email completed application and a picture to Jim Allison at:**

JRA188@aol.com (No signature is required on email copy)

**Questions, call:** Jim Allison at 201-213-6382

|  |  |
| --- | --- |
|  | **Application Timeline**  |
|   | Applications from **students ages 15 to 18** will be accepted beginning December 1, 2017 and will continue to be accepted until all positions are filled.  |
|   | Students must be interviewed and accepted into the program. Interviews will be scheduled January – March.  |
|   | Interviews are granted in the order the applications are received.  |
|     | Once 28 students are accepted into the program the application process will close regardless of dates.  |

**Information and Instructions**

**2018 Short Term Youth Exchange to Japan**

\***Read information and directions carefully before completing the application.**

***This application must be typed on this form using Microsoft Word using a PC.***

* When the application is complete, attach it to an email and send it to Jim Allison at JRA188@aol.com. The application must be sent as an attachment to the email. Please do not change the Word document format. **No signatures need to be included with the email application. You and your parents will sign the application at the interview.**

* Each applicant must send a passport size head and shoulders photo as a separate attachment with the application. When both documents are received, your name will be placed in the queue for an interview. If you are accepted, this picture will appear on your business cards and other program materials. Passport photos or school portraits work well.

* Short Term Youth Exchange Program participants will be interviewed and a determination will be made regarding acceptance. If you are accepted as a program participant, a copy of this application and photo will be sent to Rotary District 2670 (Shikoku, Japan) and to your host families in Japan. It will serve as your introduction to your host family. It is important that the first impression you make is a good one.

* **Passport:** If you do not have a passport, or if it is about to expire, apply for one or renew it immediately. It is mandatory that your passport be available by April 1, 2018 when group airline tickets are purchased. It can take several weeks to obtain a passport.

* **Cost of participation in the program:** The cost of the trip is $3,000, all inclusive. If you are accepted into the program, a $500 non-refundable deposit is required. The balance is due at the orientation program in April.

* **Dates of Travel:** Departure is scheduled for June 28, 2018, returning July 19, 2018. Note: Travel dates may vary, plus or minus 3 days, depending on availability of airline flights.

* **Applicant and Parents/Legal Guardian:** All parent/guardian information must be completed. If your parents are divorced or separated, provide the requested information for both parents (not step parents). If someone other than a parent is your legal guardian, provide the requested information for the legal guardian. Authorizations must be obtained from all parents/guardians.
* **Local Rotary Club in Your Community:** After acceptance into the program you will need to make contact with a local Rotary club in your community to obtain “Rotary Banners” for exchange with Rotary clubs in Japan. Having a relationship with a local Rotary club will give you a better understanding of the purpose of Rotary.

* **Program Rules and Conditions of Exchange:** As a condition of participation, students and parents must agree to the conditions established for the program. Complete information and details are on the last pages of the application.



 **2018 Application**

**Short Term Youth Exchange to Japan**

 **Rotary District 7470**

**Applicants must complete this form on a PC using Microsoft Word. Do not change this format. Read application instructions before completing.**

**1. Applicant Information**

|  |
| --- |
| **Full Legal Name as it appears on passport:** |
| First Name:       | Middle Name:       |  | Last Name:       |  Gender: [ ]  Male [ ]  Female |
| Street Address:       | City, State, Zip Code:       |
| Cell Phone:       |  | Email address:       |
| Date of Birth(e.g. yy/mmm/dd): Year       Month       Day       | Age:       | Current school:       |
| Place of birth(City,State,Country):       | Country of citizenship:       |
|  Do you have a current passport? [ ]  YES [ ]  NO | Passport Number:       | Expire Date:       |

**2. Parent/Legal Guardian Information**

|  |  |
| --- | --- |
| **Full Name of Father/Parent/Legal Guardian** | **Full Name of Mother/Parent/Legal Guardian** |
| First Name:       | Last Name:       | First Name:       | Last Name:       |
| Street Address:       | Street Address:       |
| City, State, Zip Code:       | City, State, Zip Code:       |
|  Cell Phone:       |  |  Cell Phone:       |  |
| Employer:       | Occupation:       | Employer:       | Occupation:       |
| Email Address:       | Email Address:       |
| Rotarian? [ ]  Yes [ ]  No | If Yes, Club Name:       | Rotarian? [ ]  Yes [ ]  No | If Yes, Club Name:       |
|  [ ]  | Check here if parents are divorced or separated. Authorization must be obtained from all parents/legal guardians and others who have legalrights to decisions affecting the student’s participation. |

**3. Shirt Size Information:**

|  |
| --- |
| Shirt Size: [ ]  Small [ ]  Med [ ]  Large [ ]  XL |

**2018 Short Term Youth Exchange to Japan**

**4. Reciprocal Hosting:**

Rotary District 7470 strongly requests that American exchange student families host Japanese exchange students during their visit to the US in August., Priority for acceptance into the program will be given to those students whose families are willing to host for **SIX DAYS** in August. This will be discussed at the interview.

Is your family able to host two Japanese students for **SIX DAYS** during the first three weeks of August? [ ]  YES [ ]  NO

Comment:

**5. Emergency Contacts Other Than Parents:**

|  |  |  |
| --- | --- | --- |
| Name:       | Relationship:       | Contact Number:       |
| Name:       | Relationship:       | Contact Number:       |

**The information below will be used as part of the interview process. If selected to participate, the information will be shared with Rotary District 2670 in Japan and the host families with whom you will be staying. Please answer the questions with sufficient information and detail so people will know about you, your interests, your likes, dislikes, etc.**

1. Why do you want to participate in this program?

1. What specifically do you want to do, see and experience in Japan?

1. Describe the community in which you live.

1. Describe your family, including: siblings, pets, family interests and activities, etc.

1. Have you ever been away from home for longer than a week without your parents or relatives?

[ ]  YES [ ]  NO If yes, where, with whom and for how long?

6. Have you ever visited another country?

[ ]  YES [ ]  NO If yes, where?

7. What is your favorite school subject?       Why?

8. What is your least favorite school subject?       Why?

9. What are your strongest characteristics?

**2018 Short Term Youth Exchange to Japan**

10. What are your weakest characteristics?

11. How do you handle difficult and challenging situations? Give an example.

12. On a scale of 1 to 10 with 1 being very shy and 10 being very outgoing, rate yourself.

13. Have you participated in any extracurricular activities in High School?

 [ ]  YES [ ]  NO

 If yes, please describe.

14. What are your hobbies?

15. What are your future plans and ambitions?

16. Other than English, what languages do you speak? (Indicate your fluency level).

 (1 = very limited, 2 = short sentences, 3 = fluent)

 Language:       Fluency Level: [ ]  1 [ ]  2 [ ]  3

 Language:       Fluency Level: [ ]  1 [ ]  2 [ ]  3

17. Identify four major issues confronting youth today.

One:

Two:

Three:

Four:

18. Select the most important issue from above and tell us why it is of personal concern to you.

|  |  |
| --- | --- |
| **Dietary Information** |  |

 19. What are your favorite foods to eat?

 20. What foods do you dislike or won’t eat?

 21. Do you have any dietary restrictions or food allergies? [ ]  Yes [ ]  No

 If yes, please describe.

**Medical Information:**

 22. Are you taking any prescription medications? [ ]  Yes [ ]  No

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Medication** | **Reason** | **Dosage** | **Frequency** | **Date Started** |
|        |        |        |        |        |
|        |        |        |        |        |
|        |        |        |        |        |

**2018 Short Term Youth Exchange to Japan**

23. Are you allergic to any animals? [ ]  Yes [ ]  No

If yes, provide additional information:

24. Are you allergic to any medications? [ ]  Yes [ ]  No

If yes, provide the name(s) of the medications and reactions:

25. Have you ever experienced an emotional disorder such as depression, anxiety

eating disorders, antisocial behavior or personality issues? [ ]  Yes [ ]  No

If yes, please describe:

26. Do you have any medical conditions, disabilities or other health issues? [ ]  Yes [ ]  No

If yes, please describe:

**Other**

27. Please complete the following Comments

|  |  |  |  |
| --- | --- | --- | --- |
| Do you smoke? | [ ]  Yes | [ ]  No |        |
| Have you ever used drugs? | [ ]  Yes | [ ]  No |        |
| Have you ever been arrested? | [ ]  Yes | [ ]  No |        |
| Have you ever been suspended from school? | [ ]  Yes | [ ]  No |        |
| Have you ever been in a physicalconfrontation with another person? | [ ]  Yes | [ ]  No |        |

28. Please provide any additional information or comments that would be helpful

regarding your participation in the Rotary Short Term Youth Exchange to Japan:

**Rotary District 7470**

**2018 Short Term Youth Exchange to Japan**

**Program Rules and Conditions of Exchange**

1. You must obey the laws of the host country. If charged with a violation of any law, student can expect no assistance from Rotary or their native country. Student will be returned home as soon as released by authorities.

2. You are not allowed to possess or use illegal drugs.

3. You are not authorized to operate a motorized vehicle of any kind. i.e., car, boat, jet ski, moped, Segway, etc.

4. Purchasing or consuming of alcoholic beverages is expressly forbidden.

5. Unauthorized travel is not allowed. Students must remain with the group or host families at all times and follow the travel plan and rules of the Short Term Youth Exchange Program.

6. You must be covered by a medical insurance policy. Parents are responsible for all expenses related to any medical issue including but not limited to medical fees, hospitalization, medications, transportation, lodging, and any supplemental airfare for the student and parents (if necessary).

7. You will be under the host Rotary District’s authority while you are an exchange student. Parents/guardian may not authorize any extra activities directly for their son/daughter. Relatives or friends in the host country will have no authority over students while they are in the program.

8. Visits by parents, relatives, siblings, or friends are not permitted.

9. Any unusual costs relative to a student’s early/late return home for violation of the Program Rules or for any other reason, shall be the responsibility of the student’s parents/guardians.

**Travel Authorizations**

The undersigned APPLICANT and the undersigned PARENTS or GUARDIANS of the applicant hereby agree that the applicant be permitted to travel to Japan and live in Rotary approved homes as a participant in the Rotary Youth Exchange Program.

**Photography/Video Release**

The undersigned APPLICANT and the undersigned PARENTS or GUARDIANS of the applicant hereby agree to allow photographs or videos to be taken of the applicant which may be used for promotion purposes of the program.

**Permission for Medical Care**

The undersigned APPLICANT and the undersigned PARENTS or GUARDIANS of the applicant hereby give PERMISSION for any administration, prescription, treatment (including administration of anesthetic, operation, blood transfusion) which a medical practitioner may deem necessary or advisable for the treatment of any illness or injury suffered by the applicant during this youth exchange. In the event of an accident or sickness, your signature on this document hereby authorizes any Rotarian, authorized chaperone of program activities, and/or host parent(s) of your son/daughter/ward to select the appropriate medical facility and physician(s)/dentist(s) to provide treatment. Your signature further gives consent to any medical or surgical treatment by a licensed physician, surgeon, or dentist that might be required for your son/daughter/ward for any emergency situation. You will be notified as soon as possible, but emergency treatment will not be delayed to provide such notice. You also agree and understand that you are responsible for the full cost of all medical treatments, hospitalization, lodging, transportation and any other related costs.

**2018 Short Term Youth Exchange to Japan**

**Declaration**

**IN CONSIDERATION** of the acceptance and participation of the applicant in this program, the undersigned APPLICANT and his/her PARENTS or LEGAL GUARDIANS, to the full extent permitted by law, hereby release and agree to defend, hold harmless, and indemnify all host parents and members of their families, and all members, officers, directors, committee members, and employees of the host and sponsoring Rotary clubs and districts, and of Rotary International, from any and all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of any negligent act or omission, excepting gross negligence or intentional conduct, of any such persons or entities, which may be suffered or claimed by such applicant, parent, or guardian during, or as a result of, the participation by the applicant in this Youth Exchange program, including travel to and from the host country.

As the undersigned applicant and undersigned parents or legal guardians of the applicant, we hereby state that we have read and understand the above regulations. We agree to abide by these rules and conditions and understand that any violation may result in abrupt termination of the exchange, and we further agree that the host Rotary Club and host Rotary District shall have final authority in enforcing these rules and conditions and any other rules and conditions which may be imposed with due notice.

The undersigned applicant, parents or legal guardians attest that the student is of good health and character, and understands the importance of the role of a youth ambassador as a Rotary Youth Exchange student, and will, to the best of his or her ability, maintain the high standards required of a Rotary Youth Exchange student. All those signing this document further state that the information provided in this application and the attached documents is true and accurate to the best of their knowledge.

**Signatures:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| (Print) Applicant Name |  | Applicant Signature |  | Date |
| (Print) Father/Parent/Guardian |  | Father/Parent/Guardian Signature |  | Date |
| (Print) Mother/Parent/Guardian  |  | Mother/Parent/Guardian Signature |  |  \_ Date |
|  |  |  |  |  |