



Rotary Youth Exchange

District 5220

Short-Term Exchange Program

Please see instructions and country preference form at www.rotary5220.org

Passport type

Photo of applicant

1. Applicant Information

Male Female

Last Name	First Name	Preferred Name	Gender
Home Address - Street			
City	State	ZIP	
Home Phone	Mobile Phone	E-mail	
Date of Birth (e.g. 01/Jan/1993)	Place of Birth (City, State, 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	ZIP	City	State	ZIP
E-mail	Mobile Phone	E-mail	Mobile Phone		
Home Phone	Business Phone	Home Phone	Business Phone		
Occupation			Occupation		
Rotarian? <input type="checkbox"/> Yes <input type="checkbox"/> No			Rotarian? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, name of Rotary Club _____			If yes, name of Rotary Club _____		

Check here, if your parents are divorced or separated

Authorization should be obtained from all parents/legal guardians who have legal rights to decisions affecting the student's participation.

Parent/legal guardian to contact first in case of an emergency: _____

3. Siblings

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
	<input type="checkbox"/> M <input type="checkbox"/> F			<input type="checkbox"/> Yes <input type="checkbox"/> No

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Applicant Name _____

4. Medical and Related Questions

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	
c. Do you drink alcohol?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
d. Do you ever have been involved with illegal drugs?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Medical Information e. Do you have any mental/medical /dental conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe.
f. Have you taken any prescribed medications in the prior six months? Please provide the name of the medication and reason it was prescribed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
g. Do you have any special health considerations (disabilities, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

5. Other Information

a. Please list the languages you have studied or speak besides English and indicate your level of fluency. (1 = Poor, 2 = Marginal, 3 = Short Sentences, 4 = Fluent)	_____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
	_____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
	_____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
	_____	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
b. Name of school and grade					

6. Essay Questions: Please answer the following questions using a word processor on a separate sheet of paper:

- 1) Why do you want to go on the Rotary youth exchange?
- 2) What are your future plans and ambitions?
- 3) What are your outside activities? What are your hobbies and accomplishments?
- 4) Tell us about your family.

Questions or Comments? Contact John Mensinger, jmensinger@4x6.com, (209) 578-5200 (work), (209) 602-4515 (cell.).

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8. Supplement Information for “Family-to-Family Individual Exchange”

Participant’s Photos

Select a color photograph for each topic below, and attach each photo to this page.

<p style="text-align: center;">My Family</p> <p style="text-align: center;"><i>(family photo)</i></p>	<p style="text-align: center;">Something important for me</p> <p style="text-align: center;"><i>(hobby, activity, friends, pet, etc.)</i></p>
<p style="text-align: center;">My Special Interest</p> <p style="text-align: center;"><i>(be creative)</i></p>	<p style="text-align: center;">My Home</p> <p style="text-align: center;"><i>(inside or outside photo of your home)</i></p>

Questions or Comments? Contact John Mensinger, jmensinger@4x6.com, (209) 578-5200 (work), (209) 602-4515 (cell.).

9. Rules and Conditions of Exchange

As a Youth Exchange student sponsored by a Rotary club or district, you must agree to the following rules and conditions of exchange.

Please note that districts may edit this document or insert additional rules if needed to account for local conditions.

1. You must obey the laws of the host country. If found guilty of violating any law, you can expect no assistance from your sponsors or native country. You must return home at your own expense as soon as released by authorities.
2. You are not allowed to possess or use illegal drugs. Medicine prescribed to you by a physician is allowed.
3. The illegal drinking of alcoholic beverages is expressly forbidden. Students who are of legal age should refrain. If you are staying with a host family and are offered an alcoholic drink, it is permissible to accept it under their supervision in the home.
4. You may not operate a motorized vehicle or participate in driver education programs.
5. You will be under the host district's authority while you are an exchange student and must abide by the rules and conditions of exchange provided by the host district. Any relatives you may have in the host country will have no authority over you while you are in the program.
6. You must have travel insurance that provides medical and dental coverage for accidental injury and illness, death benefits (including repatriation of remains), disability / dismemberment benefits, emergency medical evacuation, emergency visitation expenses, 24-hour emergency assistance services, and liability, in amounts satisfactory to the host Rotary club or district in consultation with the sponsor Rotary club or district, with coverage from the time of your departure from your home country until your return.
7. You should have sufficient financial support to assure your well-being during your exchange.
8. You must follow the travel rules of your host district. Travel is permitted with host parents or for Rotary club or district functions authorized by the host Rotary club. The host district and club and your parents or legal guardians must approve any other travel in writing.
9. You must return home directly by a route mutually agreeable to your host district and your parents or legal guardians.
10. Any costs related to an early return home or any other unusual costs (language tutoring, tours, etc.) are the responsibility of you and your parents or legal guardians.
11. You should communicate with your host family, if applicable, prior to leaving your home country. The family's information must be provided to you by your host club or district prior to your departure.
12. Talk with your host club counselor or other trusted adult if you encounter any form of abuse or harassment.
13. Obey and respect the Rotarian Chaperone(s) if one is on your exchange.

10. More Rules and Recommendations for a Successful Exchange

1. Smoking is discouraged. If you state in your application that you do not smoke, you will be held to that position throughout your exchange.
2. Body piercing or obtaining a tattoo while on your exchange is not allowed, for health reasons.
3. When in a host family, respect your host's wishes. Become an integral part of the family, assuming duties and responsibilities normal for children in the family.
4. Attend Rotary-sponsored events and, if living with a family, host family events, and show an interest in these activities. Volunteer to be involved; do not wait to be asked.
5. Avoid serious romantic activity. Abstain from sexual activity.
6. Do not borrow money. Pay any bills promptly. Ask permission to use the phone or computer, keep track of all calls and time on the Internet, and reimburse the costs you incur.
7. Limit your use of the Internet and mobile phones. Excessive or inappropriate use is not acceptable.
8. If you are offered an opportunity to go on a trip or attend an event, make sure you understand any costs you must pay and your responsibilities before you go.

11. Permission for Medical Care and Release of Medical Records and Liability

We, the parents/legal guardians of the applicant, and I, the applicant, HEREBY AUTHORIZE the release of medical information related to this application. We, the parents/legal guardians of the applicant, and the applicant, if of legal age, who have the sole and legal right to make the decisions on the health and care of the applicant, do release from liability and grant permission as noted of the following while our son/daughter/ward is overseas as a Rotary Youth Exchange student:

- In the event of accident or sickness, we/I authorize any Rotarian, authorized chaperones of Rotary activities, and/or host parent(s) of student to select the appropriate medical facility and physician(s)/dentist(s) to provide treatment.
- We/I give permission for any operation, administration of anesthetic, or blood transfusion that a medical practitioner may deem necessary or advisable for the treatment of our son/daughter/ward.
- We/I further consent to any medical or surgical treatment by a licensed physician, surgeon, or dentist that might be required by our son/daughter/ward for any emergency situation. We do request that we be notified as soon as possible, but emergency treatment need not be delayed to provide such notice.

We agree to hold harmless Rotary International, any Rotary district, Rotary club, Rotarian, Rotary chaperone, or host family for any intervention in an emergency situation regardless of final outcome. We agree to assume all financial obligations beyond those covered by insurance for any medical treatment rendered.

Signed on (Date) _____

Applicant Father/Legal Guardian Mother/Legal Guardian Witness Rotarian

12. Guarantee Form

Male Female
Gender

Full Legal Name

Date of Birth

Place of Birth

Citizen of (Country)

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 sponsor Rotary clubs and districts, and of Rotary International, from any or 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 such 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 understood the Program Rules and Conditions of Exchange. Should I, as a student, be selected for an exchange, I agree to abide by these rules and others imposed on me with due notice during my time as an exchange student in the host country. We attest that we have read and understand the Statement of Conduct for Working with Youth. We understand that all Rotarians and host families are expected to have read and understand this statement as well. I understand that, if selected for an exchange, I will be provided with training on abuse and harassment and that this information will include the contact information of the person I should contact if I encounter any form of abuse or harassment. I attest that I am of good health and character, understand the importance of the role of a youth ambassador as a Rotary Youth Exchange student, and will, to the best of my ability, maintain the high standards required of a Rotary Youth Exchange student should I be chosen to represent my sponsor Rotary club and district, school, community, state/province, and country. I further state that all the material contained in this application and the attached documents are true and accurate to the best of my knowledge.

(A) APPLICANT GUARANTEE I, the applicant named above, agree to do the following: (1) Purchase round-trip air travel before I depart my home country; (2) abide by the rules and decisions of the program, accepting advice and supervision of my hosts; (3) attend all orientations and trainings offered by my sending and host districts and clubs; and (4) not request permission to stay in my host country, and return home after completion of my exchange.

(B) PARENT/LEGAL GUARDIAN GUARANTEE We, the parents/legal guardians of the above named applicant, agree to do the following: (1) Pay all costs of transportation, passport, and visa; (2) pay costs for health and accident insurance; (3) attend orientation meetings; and (4) abide by program rules.

The Undersigned **APPLICANT** and **PARENTS/GUARDIANS** hereby agree to the Applicant's and Parents'/Guardians' Guarantee (A and B) and that the applicant is permitted to travel to the host district.

Signed on (Date) _____

Applicant

Father/Legal Guardian

Mother/Legal Guardian

Witness Rotarian

(C) SENDING CLUB AND DISTRICT ENDORSEMENT

The Rotary Club and District, having interviewed the applicant and his/her parents/legal guardians and reviewed the student's application, hereby endorse the student as qualified for Rotary Youth Exchange and recommend to host clubs the acceptance of this student. District agrees to provide adequate orientation to the student and parents before the student's departure.

Signature Rotary Club President

Signature District Youth Exchange Chair

Date

Name Rotary Club President

Name District Youth Exchange Chair

Name of Club

Club ID #

District #

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.

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