

STUDENT APPLICATION *Print Neatly in Black Ink*



Legal Name: First _____ Last _____
(must match passport)

School _____ Teacher _____
(Organizing Trip)

Sex F M Birth Date ____ / ____ / ____
month day year

U.S. Citizen Yes No If no: _____
country of citizenship

Address _____

City _____ State _____

Home Phone (____) _____
Zip _____

Parent e-mail address (please print very clearly)

Mother: First _____ Last _____

Address (if different from above) _____

Occupation _____

Work (____) _____ Cell (____) _____

Father: First _____ Last _____

Address (if different from above) _____

Occupation _____

Work (____) _____ Cell (____) _____

Siblings (name/age): _____

Have you been a host family with Language & Friendship? Yes _____

Emergency Contact (if parents unavailable):

Name _____

Phone (____) _____ or _____

Relationship _____

By my signature below, I certify the following:
• I have read the application booklet and the release on the reverse of this form and grant permission for my child to participate.
• I agree to the conditions and expectations for participation.
• I accept the payment schedule and cancellation policy.
• No information regarding the participant's health or behavior has been omitted or misrepresented.

Parent Signature _____ Date _____

Language level year of travel:
__ I __ II __ III __ IV __ V

Height _____ Religion _____

Health: Medication, allergies, dietary needs must be managed by the student and not require special attention.

Do you have any pet or smoke allergies? Yes No
If yes, please indicate: _____

Can the allergy be controlled with medication? Yes No
If no, a doctor statement will be required.

Do you have other types of allergies, chronic illness, ADHD, depression or other health issues? Yes No

If yes, please indicate: _____

Will you be taking any medication during your stay?

Yes No If yes, what kind and for what reason?

Is there anything else your leader / host family should know?

Getting to Know You Describe your interests (musical, sports, activities, favorite school subjects, future plans):

Describe your character/personality: _____

Describe the interests of your family and family activities:

What do you hope to learn from the family stay?

By my signature below, I certify that
• I have read the application booklet.
• I agree to the conditions and expectations for participation.
• I accept the payment schedule and the cancellation policy.

Student Signature _____ Date _____

Parents and students: please read reverse before signing - then complete application checklist