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Name (in native language)		
Today's Date day month year		Form 1
day month year	BIOGRAPHICAL	INFORMATION
INSTRUCTIONS Note to students Planes would all of the instructions countylly before you atom	a da fill and dhia amaliantian Canadiis instan	-
Note to student: Please read all of the instructions carefully before you star the top of the form, and additional instructions are located on the last page		ctions for each form are located at
You must complete every section on each form in this application, an below. If you do not return the completed application and one copy by <u>All forms must be filled out in English</u> . When writing a name or address Jaday Istiqlal, <u>not</u> Independence Boulevard. Write your name at top of	y the date below, your application will n s in English, use English letters, but do i	not be considered.
DUE DATE IS SO	HOOL TRANSCRIPT INCLUDED	? 🖵 Yes 📮 No
Have you participated in the English Access Microscholarship p	rogram? 🗆 Yes 🔲 No	
STUDENT INFORMATION		
Last (Family) Name:	City/Town:	Province:
(as written on passport)	Address:	
First Name:	Home telephone: City code	Number
Middle Name:	Mobile telephone number:	
Gender (circle one): Male Female Age:	Other telephone number where you	u can be contacted:
Birthdate: Day Year	City code Number	er
Month (circle one): Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec Place of birth:	Whose telephone is this? Relationsh	ip to you:
Country of birth:	Last Name First N	lame Middle Name
Citizenship:	Fax number: City code N	umber
Country:	Whose fax number is this?	
Are you a U.S. citizen, permanent resident or Green Card holder?	Have you (or your parents) ever ap	oplied to emigrate to the U.S.?
☐ Yes ☐ No	☐ Yes ☐ No	
FAMILY INFORMATION If parent is no longer alive, write "de	eceased." If parent is unknown, write "	'unknown".
MOTHER Last Name:	FATHER Last Name:	
First Name:	First Name:	
Middle Name:	Middle Name:	
Work telephone: City code Number	Work telephone: City code	Number
Home telephone: City code Number	Home telephone: City code	Number
Mobile telephone number:	Mobile telephone number:	

DO NOT WRITE IN THIS SECTION

City/Town: ______ Province: _____

Address: _____

Country:

This Document is FREE OF CHARGE

Country:

City/Town: ______ Province: _____

Missing Items:



STUDENT NAME:			
	Last Name	First Name	Middle Name

Form 2 ACTIVITIES AND ACHIEVEMENTS

Address: School Di Email addre VITIES, INTERESTS AND SPOR Setball SEVEMENTS, AWARDS LEADERSHIP POSITIONS	RTS NAME OF INSTITUTION	First Name HOURS EACH MONTH 8 hours per month	Middle Name
Address: School Directions School Direction	RTS NAME OF INSTITUTION	First Name HOURS EACH MONTH 8 hours per month	DATES OF ACTIVITY (from-to) 2008-2009
Email address VITIES, INTERESTS AND SPOR Setball SEVEMENTS, AWARDS LEADERSHIP POSITIONS	NAME OF INSTITUTION	HOURS EACH MONTH 8 hours per month	DATES OF ACTIVITY (from-to) 2008-2009
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EVEMENTS, AWARDS LEADERSHIP POSITIONS	NAME OF INSTITUTION	N	DATE RECEIVED
LEADERSHIP POSITIONS		N	DATE RECEIVED
ish Contest – 1st place	School No. 140		2009
	_		
	_		
,		ease list in this section	
DATES (month and year) FROM: TO:	CITY, STATE AND COUNTRY		PE OF PROGRAM
Nov. 2009 - Dec. 2009	Munich, Germany		Cultural
	DATES (month and year) FROM: TO:	DATES (month and year) FROM: TO: CITY, STATE AND COUNTRY	DATES (month and year) FROM: CITY, STATE AND COUNTRY CITY AND COUNTRY

SECTION 4

Place an "X" next to any sports, interests, or hobbies in which you have participated in the last three years. Then write how many hours per week you participate in this activity.

Answer truthfully. You may be expected to participate in these activities in the United States.

SPORTS	HOURS PER WEEK	SPORTS	HOURS PER WEEK
■ Aerobics/Shaping		☐ Roller-Skating/Roller-Blading	
☐ Badminton		☐ Running/Jogging	
■ Basketball		☐ Skateboarding	
■ Bicycling		☐ Skiing	
☐ Boating		☐ Snowboarding	
☐ Cricket		Swimming	
☐ Football (Soccer)		☐ Table Tennis	
Gymnastics		Tennis	
☐ Hiking		☐ Track and Field	
Hockey		☐ Volleyball	
☐ Horseback Riding		☐ Weightlifting	
☐ Ice-Skating		☐ Wrestling	
☐ Martial Arts		•	
		Other:	
■ Mountain/Rock climbing		Other:	
INTERESTS/HOBBIES	HOURS PER WEEK	INTERESTS/HOBBIES	HOURS PER WEEK
☐ Acting (Drama/Theater)		☐ Listening to Pop Music	
☐ Art		☐ Modern Dancing	
☐ Astronomy		☐ Movies	
☐ Auto Mechanics		☐ Museums	
☐ Ballet		Opera	
☐ Ballroom Dancing		☐ Painting/Drawing	
☐ Camping		Pets	
☐ Cars		☐ Photography	
☐ Ceramics/Pottery		Pop Concerts	
☐ Chess		☐ Playing Cards	
☐ Classical Concerts		☐ Playing Musical Instrument(s	
☐ Computers		Reading	/
☐ Cooking		Religious Activity	
☐ Crafts		School Clubs	
☐ Current Events/Politics		☐ Scouting	
Debates		☐ Singing (in Choir)	
☐ Environmental Issues		Sporting Events	
Folk Music		☐ Stamp Collecting	
		☐ Television/Video	
Fishing		Theater	
☐ Forestry			
Gardening		☐ Travel	
☐ Hunting		☐ Tutoring/Teaching	
☐ Indoor Plants/Flowers		☐ Video Games	
Interior Design		☐ Writing	
☐ Knitting/Sewing		☐ Writing Letters	
☐ Listening to Classical Music		Other:	
		Other:	



STUDENT NAME:				_
	Last Name	First Name	Middle Name	



INSTRUCTIONS

Write your American host family a letter. Introduce yourself. Include information about your interests, friends, and city or village. Describe your family. What kind of activities do you and your family enjoy doing together? What are your responsibilities at home? Why do you want to be a YES participant? What plans do you have for your future and career? Write your letter in English. You may only use both sides of Form 3.

CTUDENT NIAME.				
STUDENT NAME:			AAA LIII AA	HOST FAMILY LETTER
	Last Name	First Name	Middle Name	
-				



STUDENT NAME:								
	Last Name)			First 1	Name		Middle Name
School Name and	Location: _							
Current class (circ	le one):	8	9	10	-11	12	other	

Form 4 RECOMMENDATION FROM TEACHER

INSTRUCTIONS

TO STUDENT: Complete the information on the top of this form. Please ask one of your teachers, who knows you well, to complete this form. If you cannot choose a teacher, you may choose your school director or a teacher from a school you have recently attended. This form must be completed and returned with your application by the due date shown on FORM 1.

TO RECOMMENDER: Please answer the questions, and sign this document. Your answers to the questions on this form will be evaluated along with the student's own application materials to determine his/her suitability for this scholarship program. Therefore we ask you to answer each question honestly, carefully and completely. Return the completed form to the student, who will attach it as part of the application. **This form must be filled out in English.** If the recommender **does not** know English, he or she should write the recommendation on a separate piece of paper, and then have a translator complete, **in English**, the English Form 4 and complete the Translator's Statement. **The recommender must then attach these two forms to each other.** If the recommender **does** know English, he or she should write the recommendation using the English Form 4 **only**.

4.1 Please describe this student's behavior. How does the student respond to authority? How does he/she relate to peers and participate in group projects with other students? What talents, interests and skills does this student have that will contribute to an international exchange experience? Please give examples.

- 4.2 Please comment on the student's motivation in school and study habits.
- 4.3 Please evaluate the student's character in the following categories (check the appropriate boxes):

Personality Traits	Excellent	Above Average	Average	Below Average
Maturity				
Openness				
Leadership				
Ability to adapt to new situations				
Ability to interact with others				
Honesty				
Responsibility				
Respect for others				
Motivation				
Curiosity				
Knowledge of English (if known)				
Comments:				

4.4.1 Has the student had any adjustment or disciplinary problems at school?	☐ Yes ☐ No
4.4.2 Has the student missed or repeated a year?	☐ Yes ☐ No
4.4.3 Does the student have a history of continuous or frequent absences from school?	☐ Yes ☐ No
4.4.4 Does the student have any special educational needs?	☐ Yes ☐ No
If you answered "yes" to any question, please explain:	

RECOMMENDATION FROM TEACHER

4.5	5 How long have you known this student? Years:		
4.6	5 In what context do you know this student?		
4.7	7 Are you a teacher at the student's high school? Yes	☐ No If no, explain.	
	Check one of the following and explain below: I feel this applicant is ready to become an exchange I have some reservations about this applicant's readi I do not recommend this applicant. Please explain:	iness to become an exchange stud	
RE	ECOMMENDER		
Nar	ame of recommender: Last Name	First Name	Middle Name
Posi	sition of recommender :		
Cou	untry: Province:	City/Town	:
Add	dress:		
Tele	ephone: City code Number		
SCH	HOOL STAMP (if no stamp, please explain):		
	SCHOOL STAMP REQUIRED		
SIGI	SNATURE OF RECOMMENDER:		
TD/	RANSLATOR'S STATEMENT		
	This section must be filled out by the translator if the orig I hereby certify that the above English translation		-
Nai	ame of translator:	First Name	Middle Name
SIGI	GNATURE:		Date:



STUDENT NAME:			
	Last Name	First Name	Middle Name

PLACEMENT INFORMATION

INSTRUCTIONS

Please fill out this form truthfully and completely. This information is not used during the selection process, so your answers to these questions do not affect your chances of being selected. Your answers on this form are used only to match you with an American host family if you are selected.

Describe a typical (normal, not special) day in your life.
1 Have you ever been to the U.S.? 🖵 Yes 🗔 No If yes, when?
How long did you stay?
2 Have you ever lived in or traveled to other countries? 🖵 Yes 🗀 No If yes, when and where
3 What are your household responsibilities?
4 What time do your parents expect you to be home during the week?
n weekends?
5 How much time do you spend on average studying at home each day? hours each day
6 Have you ever lived away from home? □ Yes □ No If yes, explain:
7 Check the box that best describes the community where you live: 🔲 urban 🔲 suburban 🔲 small town 🔲 rural area
8 What is the population of your community? (approximate):
LANGUAGE STUDY
1 How many years have you studied English? years At what age did you begin to study English?
2 What is the primary language spoken in your home?

			Mil							

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	e:	Ye	ars studied		Pooi	- 🔲 Fair	☐ Good	■ Excellent
Language	e:	Ye	ars studied		Poor	□ Fair	☐ Good	Excellent
Language	e:	Ye	ars studied		Poor	🔲 Fair	☐ Good	Excellent
Language	e:	Ye	ars studied		Poor	🔲 Fair	☐ Good	Excellent
3 Future Pla	ans: Do you inte	end to continue y	our education upor	completion	of secondary sch	ool? 🔲 Ye	es 🔲 No	
3.1 If yes, wh	at do you intend	d to study?						
3.2 What are	your future job	or career plans?						
4 About you	r family. Who liv	ves in your home	e? (indicate all that	apply)				
Father	name	age	occupation	Mother	name	age	occupo	ntion
Grandfather		ago	occopanion	_ Grandmothe		ago	occop.	
Ordinardiner	name	age	occupation	_ Ordinalilollie	name	age	occupo	ation
Brothers	name	age	occupation	Sisters ——	name	age	occupo	ation
	name	age	occupation		name	age	occupo	ation
	name	age	occupation		name	age	occupo	ation
Others	name	age	relationship to you	Others	name	age	relatio	nship to you
		~9~	retailed in 700			-90		
	name re:		occupation ightharpoonup single ightharpoonup divo		name rced, 🛄 mothe yes, explain:			her remarrie
4.2 Do you ha 5 What is you 5.1 How often 5.2 Do you no 6 Can you sw 7 Do you sm For all applicant	re: married ave family membrane four religion, if and do you currently eed a special playing a Yes oke? Yes ats: Whether or a that there are lar	separated pers or friends in pay? y attend religious ace for prayer? No No No not you smoke, i	single divo	□ No If	rced, mother yes, explain: once or more	a week	occasion	ally never
4.2 Do you ha 5 What is you 5.1 How often 5.2 Do you no 6 Can you sw 7 Do you sm For all applicant	re: married ave family membrane four religion, if and do you currently eed a special playing a Yes oke? Yes ats: Whether or a that there are lar	separated pers or friends in pay? y attend religious ace for prayer? No No No not you smoke, i	single divo	□ No If	rced, mother yes, explain: once or more	a week	occasion	ally never
4.2 Do you ha 5 What is you 5.1 How often 6.2 Do you no 6 Can you sw 7 Do you sm For all applicant I understand to	re: married ave family membrane four religion, if and do you currently eed a special playing a Yes oke? Yes ats: Whether or a that there are lar	separated pers or friends in ny? y attend religious ace for prayer? No No No not you smoke, i ws restricting sm gree to honor th	single divo	ne country?	rced, mother yes, explain: once or more owed to smoke we school, and that	a week	occasion	ally never
5 What is you feel to smoking in	re: married ave family membrour religion, if and do you currently eed a special play wim? Yes oke? Yes ats: Whether or a that there are lay their home. I a	separated pers or friends in ny? y attend religious ace for prayer? No No No not you smoke, i ws restricting sm gree to honor th	single divo	No If	rced, mother yes, explain: once or more owed to smoke we school, and that	a week	occasion	ally never
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5 What is you for 5.1 How often 5.2 Do you not 6 Can you swar 7 Do you small applicant 1 understand to smoking in 5 Can you live 9 Do you have	re: married ave family membrour religion, if are ado you currently eed a special play wim? Yes oke? Yes ats: Whether or a that there are lay their home. I a	separated pers or friends in pry? y attend religious ace for prayer? No No No not you smoke, i ws restricting sm gree to honor th Student sig	single divo	No If	rced, mother yes, explain: once or more owed to smoke we school, and that this statement) yes No yes No	a week while on the	occasion	ally never
5 What is you had 5.1 How often 5.2 Do you not 6 Can you swar 7 Do you small applicant 1 understand to smoking in 6 Can you live 9 Do you had 1 yes, please 1 yes, please 1	re: _ married ave family membrour religion, if and o you currently eed a special playing? _ Yes oke? _ Yes oke? _ Yes oke? _ Yes obtains: Whether or in that there are lated their home. I and their home. I are explains of the explains of	separated pers or friends in ny? y attend religious ace for prayer? No No No student sig pere other people estrictions for her	single divo	No If	rced, mother yes, explain: once or more owed to smoke we school, and that this statement) yes No yes No	a week	e YES programily may h	ally never
4.2 Do you had 5 What is you 5.1 How often 6.2 Do you no 6 Can you sw 7 Do you sm For all applicant I understand to smoking in 8 Can you live 9 Do you had If yes, please 10 Do you had	re: married ave family membrour religion, if are do you currently eed a special play wim? Yes oke? Yes ats: Whether or a that there are late their home. I a ve in a home where any dietary re explain: ave allergies?	separated pers or friends in ny? y attend religious ace for prayer? No No No not you smoke, i ws restricting sm gree to honor th Student sig pere other people estrictions for hea	single divo	No If we will not be all attended to the strictions. The strictions of the strictions of the strictions of the striction of	rced, mother yes, explain: once or more owed to smoke we school, and that this statement) Yes No Yes No	a week while on the	e YES programily may h	ally never new in the U.S ave objection
What is you had 5.1 How often 5.2 Do you not 6.2 Do you small applicant and the smoking in 9. Do you had 11 yes, please explain 1. Please explain	re: married ave family membrour religion, if and do you currently eed a special place wim? Yes oke? Yes oke? Yes oke? Yes oker are later their home. I and their home. I are explain:	separated pers or friends in ny? y attend religious ace for prayer? No No No not you smoke, i ws restricting sm gree to honor th Student sig pere other people estrictions for her Yes No	single divo	No If we will not be alluste and host strictions. Herstanding of mome? Yener reasons?	rced, mother yes, explain: once or more owed to smoke we school, and that this statement) Yes No Yes No	a week while on the	e YES programily may h	ally never new in the U.S ave objection



STUDENT NAME:			
	Last Name	First Name	Middle Name



INSTRUCTIONS

- 1) On this page glue 2 photos, taken within the last two years, showing you with your family or friends. Write your name clearly in English on the back of each photo.
- 2) You must also submit <u>2 PASSPORT SIZE PHOTOGRAPHS</u>. Please smile! Place these 2 photographs in an envelope, seal the envelope and attach it to the back of this form. On the envelope write in English your <u>name</u> (last, first, middle), your <u>date of birth</u> (day/month/year), and your <u>home town</u>. You must include all of the required photographs as part of your completed application by the due date shown on FORM 1.
- 3) All photographs are used in the host family placement process and help introduce you to your American family. Photos are <u>not</u> used during the selection process, and they are <u>not</u> used for passports or for any other official documents.
- 4) The photographs will not be returned to you.

	1 Describe the photo. Indicate which person is you.
	For example, the End person from the left
And I do I	
Attach photo here	
	-
	2 Describe the photo. Indicate
	which person is you.
Attach photo here	
·	
	_

STUDENT NAME:

Last Name

First Name

Middle Name

Form 7 PARENT/STUDENT AGREEM

INSTRUCTIONS

You and your parents should carefully review this document and must sign all three English-language copies. One copy should be removed from this application and kept by your parents. Return the two remaining copies as part of your completed application by the due date shown on FORM 1.

A. PURPOSE

A. PURPOSE
The Youth Exchange & Study Program (YES), ["the Program"], funded by the United States Government, promotes respect for cultural diversity, friendship between the United States of America and your country, and opportunities for personal development through international host family living. The Program is implemented by private, not-for-profit organizations ("YES program organizations"). It provides the opportunity to attend an American school, share in U.S. family life, learn about the United States, increase the participants' sensitivity to cultural differences and similarities, and develop a deepened awareness of shared human values and interests. The Program, as implemented by YES program organizations, consistent with its commitment to international understanding, does not discriminate on the basis of race, color, national origin, religion or sex in employment or in making selections and placements of students.

B. PARENT AGREEMENT

General Program Policies

- 1. We give our son or daughter permission to participate in this Program. We and our son or daughter will obey the policies described in the Program Handbook and YES program organization guidelines. We understand that the original English-language version of this document represents the final authoritative wording of all policies and guidelines.

 2. We affirm that we or any other immediate family member has not applied at any time to the policies and guidelines.
- emigrate to the U.S.A. We understand that if application for immigration has been filed, the U.S. Embassy will not issue a visa for the Program to our son or daughter. We affirm that we or any other immediate family member (whether estranged or not) is not a U.S. citizen or
- green card holder.

 3. We acknowledge that our son or daughter has not stayed in the U.S. for three (3) months more during the past five (5) years.
- We understand that our son or daughter must meet the Program eligibility requirements and is a citizen of the country in which s/he is applying, and is able to receive a passport of
- 5. Home stay requirement: As participants of an exchange program funded by the U.S. Government, YES students are subject to Department of State's Two-Year Home-Country Physical Presence requirement [212(E)], which stipulates that the student must reside in their
- home country for a minimum of two years after completing their educational or cultural exchange program before they are eligible for immigrant or temporary worker status.

 6. We understand that we may not visit our son or daughter during his or her participation in the YES Program unless we obtain written approval from the YES program organization.

 7. We understand that if our son or daughter is selected to receive a scholarship, final acceptance will depend on fulfillment of the medical, placement, and academic requirements of the specific related to receive a scholarship. of the sponsoring student exchange organization. 8. We agree to release and discharge the YES program organizations, employees, host
- families, program representatives, and school representatives from any legal liability, claim, or demand in connection with:
- a. any emergency, accident, illness, injury or other consequences or event arising from the actions or participation of our son or daughter in the Program, or b. any cause, event or occurrence beyond the control of the YES program organization,
- including, but not limited to, natural disasters, war, terrorism, civil disturbances, and the negligence of parties not subject to the control of the Program organization.

Travel Policies

- We agree that our son or daughter will travel to and from the United States in strict accordance with the travel plans made by the Program.
- 10. We will not encourage or permit our son or daughter to travel outside the host community during his or her participation in the Program except in strict accordance with the following
- requirements:

 a. Where our son or daughter desires to travel outside the host community with and under the supervision of his or her host parent(s), school official or other responsible adult, our son or daughter must first obtain written approval for such travel from the YES program organization. For international travel this includes authorization of the DS2019 form.
- b. Where our son or daughter desires to travel outside the host community unaccompanied by his or her host parent(s), school official or other responsible adult, our son or daughter must obtain written approval for such travel from the YES placement organization and us. For international travel this includes authorization of the DS2019 form.
- international travel this includes authorization of the DS2019 form.

 c. We understand that many YES placement organizations place limits on or do not allow visits with natural family members or friends. We agree to follow all placement organization rules concerning visits with natural family members or family friends.

 11. We understand that our son or daughter will be responsible for paying any fees incurred for carrying baggage in excess of the baggage limits set by the airlines used for Program ravel. We understand that this provision applies to both international travel and domestic travel within both the U.S.A. and our country.

 12. We understand that in making travel arrangements for our son or daughter, the YES program organization contracts with or uses commercial airlines, trains, buses, restaurants, hotels and other entities whose performance and services cannot be controlled by the
- hotels and other entities whose performance and services cannot be controlled by the Program. Consequently, we agree that the YES program organization is not liable for any of

CICALATURE OF A DARENT OR LEGAL CHARDIAN.

the actions or negligence of such commercial entities including, but not limited to, lost baggage, uncomfortable accommodations, and travel delays. We further agree that the YES program organization reserves the right to change or alter travel, lodging or other arrangements if it believes such change or alteration to be in the best interest of the participants or the Program.

13. We understand that our son or daughter must return home at the end of the program on the date assigned by the responsible YES program organization. Changes to the assigned departure date will not be made to accommodate graduation, prom or other special school or family events that occur after the assigned date. We understand that the U.S. visa issued to our son or daughter will not be amended or extended beyond the program end date. No exceptions will be made to this policy.

School and Host Family Placement

- 14. We authorize the YES program organizations, employees and representatives to change the place of residence or school designated for our son or daughter when they believe such change to be in the best interest of our son or daughter. We understand that we will be
- notified of any such changes.

 15. We recognize that schools in the U.S. may impose academic standards or other requirements in determining grade level placement that differ from those imposed in the school our ments in determining grade level placement that differ from those imposed in the school our son or daughter now attends. We acknowledge and accept that participation in the program does not guarantee credit or graduation from the school our son or daughter now attends or from the U.S. school he or she will attend while participating in the Program. We understand that it is our responsibility to arrange with the school our son or daughter now attends to receive credit or to take exams upon completion of the Program; or to arrange for permission for academic absence from any institute or university to be attended upon return.

 16. We are aware that the U.S.A. is a multi-racial, multi-ethnic country providing a diversity of possible living experiences and that there is no single living experience that is typical. We understand that placements are made on the basis of criteria designed to determine suitability of host families, and the Program does not discriminate on the basis of race, religion or ethnic origin, either of students or of host families.
- religion or ethnic origin, either of students or of host families.

 17. We understand that there are strict laws restricting smoking in the U.S. and that the host
- family may have objections to smoking in their home. We agree to honor these laws or restrictions.

Health/Medical Issues

- 18. We confirm that the information stated in the Student Health Certificate is accurate and contains no material omissions of which we are aware. We will immediately inform the YES program organization of any change in information given. We understand that such new information may require reconsideration of our son's or daughter's status in the Program. In the event our son/daughter has a recurrence of any previous illness or anything contracted before leaving home or in the U.S. that is not covered by insurance, we authorize the YES organization to release our child to our care in our country. We will not hold the YES organization responsible for any debts incurred in connection with this permission. We understand that treatment will be provided for injuries sustained by our son or daughter while on
- Program but the extent of coverage is subject to the insurance provider's rules and policies.

 19. We confirm that we have provided a full and complete medical and immunization history on our son or daughter. We understand that U.S. schools absolutely require immunizations, and we agree to allow the Program organization to arrange for all such immunizations which are required for our son/daughter. We understand that such immunizations will be administered according to U.S. medical standards and at no expense to us or our son or daughter.
- 20. As the applicant's parents or guardians, we agree to and do hereby authorize the YES program organization, its personnel and representatives, and the adult members of the host family, to act for us in any emergency, accident or illness.

Termination from the Program

- 21. We understand that our son or daughter may be dismissed from the Program for behavior that the Program, at its discretion, considers detrimental to our son or daughter or to the
- 22. We agree that if we violate any provision of this Agreement, or if our son or daughter, during his or her stay in the U.S does any of the following, then it may be determined that our son or daughter has voluntarily withdrawn from the Program:
- a. is absent without authorization from the host school or the place of residence designated by the YES program organization; or
- b. violates any provision of this Agreement; or
- c. Has misrepresented him or herself in the program application.

 23. If our son or daughter voluntarily withdraws, or is dismissed, from the Program at any time after departure from our country, we understand that his or her scholarship, visa and health insurance coverage are canceled.

Declaration

- 24. We have discussed the Program and this Agreement with our son or daughter, and each
- of us fully understands the obligations imposed on us.

 25. We confirm that all information provided in this application is truthful. We understand that any misrepresentation or false answer in this application can be grounds for our son or daughter's elimination from the Program.

C STUDENT AGDEEMENT		and an alternation	Section 20 decided	Call	Daniel C. II.
		Last Name	First Name	Middle Name	
SIGNATURE OF A PARENT OR LEGAL GUARDIAN:	Parent's written name:		Date:		

I have read this Agreement and discussed with my parent(s) its terms and conditions. I agree with the purpose of the Program and fully accept all terms and conditions of this Agreement, and all other rules, regulations and conditions set forth concerning the Program. In particular I will do my best to become an integral part of my host family, school and community; will travel only in accordance with Paragraphs 9, 10 and 13 of this Agreement; and will attend the school designated for me on a regular basis and complete all work to the best of my ability. I herby certify that the information provided in all parts of this application is truthful. I understand that any misrepresentation or false answer can be grounds for my elimination from this program.

SIGNATURE OF STUDENT:		Date:
I hereby attest that the student and the student's parent or legal guardian have sign	ed this document before me.	
SIGNATURE OF WITNESS:	Written Name:	Date:

Written Name: Last Name Middle Name First Name



The policies presented here are the general policies for students. Since variations regarding specific policies and procedures exist among program organizations, it is important that you check with the representatives or office of your program organization in the U.S.A.

PROGRAM ELIGIBILITY REQUIREMENTS

Participation on the Program: Applicants will be considered for a scholarship to participate on this Program if:

- 1. No immediate family member has applied at any time for permission to emigrate to the U.S.A. or for a green card;
- 2. The applicant meets the YES age and grade (class) requirements for his or her country; and
- 3. The applicant is a legal citizen of the country from which he or she applies.

GENERAL POLICIES

- Internet: Students are required to follow ALL RULES regarding use of the computer (regardless of whose property it is) and the Internet as determined by his/her placement organization, host family and/or host school. Students who place private (contact information, pictures, etc.) or inappropriate information on the Internet may be dismissed from the program. The rules are intended to protect students' safety and are based on federal guidelines and laws governing what can and cannot be posted online. Violation of any of these rules may result in dismissal from the program or criminal charges. Students who in any way put the safety of themselves or others at risk by misusing the Internet may be dismissed from the program
- Dangerous/risky activities: The following activities have been determined by most insurance companies to be too risky, and treatment for injuries sustained while participating in the them will not be covered by insurance: driving any motorized vehicle (such as a car, motorcycle, all-terrain vehicle, etc.) hang gliding, bungee jumping, jumping on a trampoline, parachute jumping, parasailing, scuba diving, piloting a private plane, mountain biking, mountaineering, rock climbing, skate boarding, extreme sports, handling or using a firearm or other weapon and any other such activities prohibited by your placement organization.
- Driving: Exchange students are not permitted to drive any motorized vehicle under any circumstances. Violators of this policy will be considered for program
 dismissal. This applies even if they are in possession of an International driver's license or if the host family feels that the student is a responsible and
 careful driver. Exceptions may be granted for farm equipment if allowed by the student's program organization. If authorized, the student must observe
 precautions regarding safety and legal limitations.
- Employment: The J-1 visa permitting the student to stay in the U.S.A. restricts employment. Program participants may seek only part-time, small jobs such as babysitting, yard clean-up, etc., according to specific regulations of program organizations.
- Marriage: Married students are not permitted on the Program. If marriage occurs while the student is a participant or is discovered to have occurred prior to the student becoming a participant, the student will be considered for Program dismissal.
- Pregnancy: If a program participant is found to be pregnant she must return to her home country. Male students who cause pregnancies also must return home.
- Student expenses: The Program provides visas, travel arrangements, host family and school placements, allowances and insurance. The Program is not responsible for additional student expenses beyond the incidentals allowance, monthly pocket allowance, and official program activities and travel. The host family is responsible for three meals a day for the student and must provide EITHER lunch money OR a bag lunch if the school does not provide free lunches for the student and the student cannot go home for lunch. All other expenses, such as extra school fees or activities, social activities, personal and hygienic supplies, postage and telephone calls, are paid by the student using Program allowances.

TRAVEL POLICIES

- Return to home country at the end of the Program: all students must return to their home country at the end of the program on the date assigned by the
 responsible YES program organization. Students will not be allowed to remain in the U.S.A after their assigned return-travel date. Those who do not
 adhere to this will be reported to the Department of Homeland Security and U.S. Immigration and Customs Enforcement and will have their program
 insurance cancelled.
- · Student travel: It is the policy of the Program that only authorized student travel is permitted. Authorized student travel must meet these three criteria:
 - The YES placement organization has knowledge of the student's location and approves the travel in advance, and/or the program organizations
 have obtained the natural parents' written permission for the travel;
 - 2. The student's safety is assured to the greatest extent possible;
 - 3. The travel does not interfere with school attendance.
- Visits with natural family, home country friends or relatives who live in the US: Such visits are strongly discouraged during the program year, especially during the initial adjustment period. Such visits interrupt the continuity of the relationship with the host family and may diminish the exchange experience for the student and host family. Policies vary by placement organization.
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 the Program. Such non-emergency trips break the continuity of the relationship with the host family and may diminish the exchange experience for the
 student and host family. Any requests for exceptions must be presented to the YES program organization in the U.S.A. and approved by the U.S.
 Department of State.

SCHOOL AND HOST FAMILY PLACEMENT

- School attendance: All program participants must attend a high school and maintain a normal course of school work. Non-attendance may result in consideration for Program dismissal or determining that the student has left the Program.
- School performance: Allowing for an initial period of linguistic and/or academic adjustment, a student must achieve and maintain adequate academic results. After a reasonable period of time, poor motivation, under-achievement, or inappropriate behavior in combination with poor family adjustment, may be cause for Program dismissal.
- School expulsion: If a student is expelled from school, that student will be considered for Program dismissal.
- YES students cannot be hosted by natural family members.

HEALTH/MEDICAL

Medical treatment of a student (including emergencies): Before a student arrives in the U.S.A., the Program must receive written permission from natural
parents to obtain emergency medical attention if needed (see Permission for Care of My Child). Students will receive complete medical attention in case
of an accident or emergency. Each insurance provider has specific policies and restrictions governing the types of expenses they will reimburse. YES
Program organizations, their representatives and host families are not responsible for any medical bills, not covered by insurance, incurred by a student
regardless of who signs a hospital admission form. The Program also is not responsible for any negative results because of medical treatment.

TERMINATION

- Leaving the Program early: If the student is absent from the host family, school or other place to which the Program has assigned him or her, without obtaining the written approval of the Program, the Program may determine that the student has left the Program through his or her own voluntary action. In this case, the Program is absolved from all obligations, legal or otherwise, to the student or his/her parents or guardians for the student's current or future well-being. The Program will, if the circumstances warrant, work with the student to return to the Program. However, if this cannot be accomplished, a decision will be made that the separation from the Program is final, and the student will receive a letter from the Program sponsor indicating that the student has been reported to the Department of Homeland Security and U.S. Immigration and Customs Enforcement. The student's medical insurance will be cancelled.
- Unauthorized travel may constitute termination from the Program: The YES placement organizations in the U.S.A. determine authorization for travel.
 Procedures for obtaining permission to travel vary by organization.

ILLEGAL ACTIVITY

- Alcohol: Students are required to observe all U.S. laws with regard to the minimum drinking age. Minimum drinking age in the U.S. is 21. The student
 will be considered for program dismissal.
- Drugs: Program participants may not possess or use drugs that are illegal in the U.S. Violators of this policy may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Theft/shoplifting: Students involved in theft (either from an individual or from a place of business) or shoplifting may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Violation of the law: If a student is found to have violated a U.S. law, is arrested, and/or is charged with a crime, the student may be dismissed from the Program but is first subject to prosecution by the U.S. legal system.



STUDENT NAME:

Last Name

First Name

Middle Name

Form PARENT/STUDENT AGREEM

INSTRUCTIONS

You and your parents should carefully review this document and must sign all three English-language copies. One copy should be removed from this application and kept by your parents. Return the two remaining copies as part of your completed application by the due date shown on FORM 1.

A. PURPOSE

A. PURPOSE
The Youth Exchange & Study Program (YES), ["the Program"], funded by the United States Government, promotes respect for cultural diversity, friendship between the United States of America and your country, and opportunities for personal development through international host family living. The Program is implemented by private, not-for-profit organizations ("YES program organizations"). It provides the opportunity to attend an American school, share in U.S. family life, learn about the United States, increase the participants' sensitivity to cultural differences and similarities, and develop a deepened awareness of shared human values and interests. The Program, as implemented by YES program organizations, consistent with its commitment to international understanding, does not discriminate on the basis of race, color, national origin, religion or sex in employment or in making selections and placements of students.

B. PARENT AGREEMENT

General Program Policies

- We give our son or daughter permission to participate in this Program. We and our son or daughter will obey the policies described in the Program Handbook and YES program organization guidelines. We understand that the original English-language version of this document represents the final authoritative wording of all policies and guidelines.

 2. We affirm that we or any other immediate family member has not applied at any time to
- emigrate to the U.S.A. We understand that if application for immigration has been filed, the U.S. Embassy will not issue a visa for the Program to our son or daughter. We affirm that we or any other immediate family member (whether estranged or not) is not a U.S. citizen or
- green card holder.

 3. We acknowledge that our son or daughter has not stayed in the U.S. for three (3) months or more during the past five (5) years.
- We understand that our son or daughter must meet the Program eligibility requirements and is a citizen of the country in which s/he is applying, and is able to receive a passport of
- 5. Home stay requirement: As participants of an exchange program funded by the U.S. Government, YES students are subject to Department of State's Two-Year Home-Country Physical Presence requirement [212(E)], which stipulates that the student must reside in their
- home country for a minimum of two years after completing their educational or cultural exchange program before they are eligible for immigrant or temporary worker status.

 6. We understand that we may not visit our son or daughter during his or her participation in the YES Program unless we obtain written approval from the YES program organization.

 7. We understand that if our son or daughter is selected to receive a scholarship, final
- acceptance will depend on fulfillment of the medical, placement, and academic require of the sponsoring student exchange organization. 8. We agree to release and discharge the YES program organizations, employees, host
- families, program representatives, and school representatives from any legal liability, claim, or demand in connection with:
- a. any emergency, accident, illness, injury or other consequences or event arising from the actions or participation of our son or daughter in the Program, or b. any cause, event or occurrence beyond the control of the YES program organization,
- including, but not limited to, natural disasters, war, terrorism, civil disturbances, and the negligence of parties not subject to the control of the Program organization.

Travel Policies

- We agree that our son or daughter will travel to and from the United States in strict accordance with the travel plans made by the Program.
- 10. We will not encourage or permit our son or daughter to travel outside the host community during his or her participation in the Program except in strict accordance with the following
- a. Where our son or daughter desires to travel outside the host community with and under the supervision of his or her host parent(s), school official or other responsible adult, our son or daughter must first obtain written approval for such travel from the YES program organization. For international travel this includes authorization of the DS2019 form.
- b. Where our son or daughter desires to travel outside the host community unaccompanied by his or her host parent(s), school official or other responsible adult, our son or daughter must obtain written approval for such travel from the YES placement organization and us. For international travel this includes authorization of the DS2019 form.
- International travel into includes authorization of the D32017 form.

 c. We understand that many YES placement organizations place limits on or do not allow visits with natural family members or friends. We agree to follow all placement organization
- its with natural tamily members or trienas. We agree to follow an pracement organization rules concerning visits with natural family members or family friends.

 11. We understand that our son or daughter will be responsible for paying any fees incurred for carrying baggage in excess of the baggage limits set by the airlines used for Program travel. We understand that this provision applies to both international travel and domestic 12. We understand that in making travel arrangements for our son or daughter, the YES
- program organization contracts with or uses commercial airlines, trains, buses, restaurants, hotels and other entities whose performance and services cannot be controlled by the Program. Consequently, we agree that the YES program organization is not liable for any of

SIGNATURE OF A PARENT OR LEGAL GUARDIAN:

SIGNATURE OF STUDENT:

the actions or negligence of such commercial entities including, but not limited to, lost baggage, uncomfortable accommodations, and travel delays. We further agree that the YES program organization reserves the right to change or alter travel, lodging or other arrangements if it believes such change or alteration to be in the best interest of the participants or the Program.

13. We understand that our son or daughter must return home at the end of the program on the date assigned by the responsible YES program organization. Changes to the assigned departure date will not be made to accommodate graduation, prom or other special school or family events that occur after the assigned date. We understand that the U.S. visa issued to our son or daughter will not be amended or extended beyond the program end date. No exceptions will be made to this policy.

School and Host Family Placement

- 14. We authorize the YES program organizations, employees and representatives to change the place of residence or school designated for our son or daughter when they believe such change to be in the best interest of our son or daughter. We understand that we will be
- notified of any such changes.

 15. We recognize that schools in the U.S. may impose academic standards or other requirements in determining grade level placement that differ from those imposed in the school our son or daughter now attends. We acknowledge and accept that participation in the program does not guarantee credit or graduation from the school our son or daughter now attends or from the U.S. school he or she will attend while participating in the Program. We understand that it is our responsibility to arrange with the school our son or daughter now attends to receive credit or to take exams upon completion of the Program; or to arrange for permission
- receive creat or to take exams upon completion of the Program; or to arrange for permission for academic absence from any institute or university to be attended upon return.

 16. We are aware that the U.S.A. is a multi-racial, multi-ethnic country providing a diversity of possible living experiences and that there is no single living experience that is typical. We understand that placements are made on the basis of criteria designed to determine suitability of host families, and the Program does not discriminate on the basis of race, religion or ethnic origin, either of students or of host families.

 17. We understand that there are strict laws restricting smoking in the U.S. and that the host
- family may have objections to smoking in their home. We agree to honor these laws or restrictions.

Health/Medical Issues

- 18. We confirm that the information stated in the Student Health Certificate is accurate and contains no material omissions of which we are aware. We will immediately inform the YES program organization of any change in information given. We understand that such new information may require reconsideration of our son's or daughter's status in the Program. In the event our son/daughter has a recurrence of any previous illness or anything contracted before leaving home or in the U.S. that is not covered by insurance, we authorize the YES organization to release our child to our care in our country. We will not hold the YES organization responsible for any debts incurred in connection with this permission. We understand that treatment will be provided for injuries sustained by our son or daughter while on
- Program but the extent of coverage is subject to the insurance provider's rules and policies.

 19. We confirm that we have provided a full and complete medical and immunization history on our son or daughter. We understand that U.S. schools absolutely require immunizations, and we agree to allow the Program organization to arrange for all such immunizations which are required for our son/daughter. We understand that such immunizations will be administered according to U.S. medical standards and at no expense to us or our son or daughter.
- 20. As the applicant's parents or guardians, we agree to and do hereby authorize the YES program organization, its personnel and representatives, and the adult members of the host family, to act for us in any emergency, accident or illness.

Termination from the Program

- 21. We understand that our son or daughter may be dismissed from the Program for behavior that the Program, at its discretion, considers detrimental to our son or daughter or to the
- 22. We agree that if we violate any provision of this Agreement, or if our son or daughter, during his or her stay in the U.S does any of the following, then it may be determined that our son or daughter has voluntarily withdrawn from the Program:
- a. is absent without authorization from the host school or the place of residence designated by the YES program organization; or
- b. violates any provision of this Agreement; or
- c. Has misrepresented him or herself in the program application.

 23. If our son or daughter voluntarily withdraws, or is dismissed, from the Program at any time after departure from our country, we understand that his or her scholarship, visa and health insurance coverage are canceled.

Declaration

Parent's written name:

- 24. We have discussed the Program and this Agreement with our son or daughter, and each
- of us fully understands the obligations imposed on us.

 25. We confirm that all information provided in this application is truthful. We understand that any misrepresentation or false answer in this application can be grounds for our son or daughter's elimination from the Program.

Date:

Date:

		Last Name	First Name	Middle Name	
C. STUDENT AGREEMENT I have read this Agreement and discussed with m	y parent(s) its terms	and conditions. I	agree with the	purpose of the	Program and fully
accept all terms and conditions of this Agreement, and all other rules, regulations an	nd conditions set forth	n concerning the	Program. In part	icular I will do r	my best to become
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hereby attest that the student and the student's parent or legal guardian have signed this document before me.						
SIGNATURE OF WITNESS:		Written Name:				Date:
SIGNATORE OF WITHESS.		William Hame.	Last Name	First Name	Middle Name	Duic.



The policies presented here are the general policies for students. Since variations regarding specific policies and procedures exist among program organizations, it is important that you check with the representatives or office of your program organization in the U.S.A.

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TRAVEL POLICIES

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 responsible YES program organization. Students will not be allowed to remain in the U.S.A after their assigned return-travel date. Those who do not
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 the Program. Such non-emergency trips break the continuity of the relationship with the host family and may diminish the exchange experience for the
 student and host family. Any requests for exceptions must be presented to the YES program organization in the U.S.A. and approved by the U.S.
 Department of State.

SCHOOL AND HOST FAMILY PLACEMENT

- School attendance: All program participants must attend a high school and maintain a normal course of school work. Non-attendance may result in consideration for Program dismissal or determining that the student has left the Program.
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TERMINATION

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 Procedures for obtaining permission to travel vary by organization.

ILLEGAL ACTIVITY

- Alcohol: Students are required to observe all U.S. laws with regard to the minimum drinking age. Minimum drinking age in the U.S. is 21. The student
 will be considered for program dismissal.
- Drugs: Program participants may not possess or use drugs that are illegal in the U.S. Violators of this policy may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Theft/shoplifting: Students involved in theft (either from an individual or from a place of business) or shoplifting may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Violation of the law: If a student is found to have violated a U.S. law, is arrested, and/or is charged with a crime, the student may be dismissed from the Program but is first subject to prosecution by the U.S. legal system.



STUDENT NAME:

Last Name

First Name

Middle Name

Form 7 PARENT/STUDENT AGREEM

INSTRUCTIONS

You and your parents should carefully review this document and must sign all three English-language copies. One copy should be removed from this application and kept by your parents. Return the two remaining copies as part of your completed application by the due date shown on FORM 1.

A. PURPOSE

A. PURPOSE
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B. PARENT AGREEMENT

General Program Policies

- We give our son or daughter permission to participate in this Program. We and our son or daughter will obey the policies described in the Program Handbook and YES program organization guidelines. We understand that the original English-language version of this document represents the final authoritative wording of all policies and guidelines.

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- emigrate to the U.S.A. We understand that if application for immigration has been filed, the U.S. Embassy will not issue a visa for the Program to our son or daughter. We affirm that we or any other immediate family member (whether estranged or not) is not a U.S. citizen or
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 3. We acknowledge that our son or daughter has not stayed in the U.S. for three (3) months or more during the past five (5) years.
- We understand that our son or daughter must meet the Program eligibility requirements and is a citizen of the country in which s/he is applying, and is able to receive a passport of
- 5. Home stay requirement: As participants of an exchange program funded by the U.S. Government, YES students are subject to Department of State's Two-Year Home-Country Physical Presence requirement [212(E)], which stipulates that the student must reside in their
- home country for a minimum of two years after completing their educational or cultural exchange program before they are eligible for immigrant or temporary worker status.

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- acceptance will depend on fulfillment of the medical, placement, and academic require of the sponsoring student exchange organization. 8. We agree to release and discharge the YES program organizations, employees, host
- families, program representatives, and school representatives from any legal liability, claim, or demand in connection with:
- a. any emergency, accident, illness, injury or other consequences or event arising from the actions or participation of our son or daughter in the Program, or b. any cause, event or occurrence beyond the control of the YES program organization,
- including, but not limited to, natural disasters, war, terrorism, civil disturbances, and the negligence of parties not subject to the control of the Program organization.

Travel Policies

- We agree that our son or daughter will travel to and from the United States in strict accordance with the travel plans made by the Program.
- 10. We will not encourage or permit our son or daughter to travel outside the host community during his or her participation in the Program except in strict accordance with the following
- requirements:

 a. Where our son or daughter desires to travel outside the host community with and under the supervision of his or her host parent(s), school official or other responsible adult, our son or daughter must first obtain written approval for such travel from the YES program organization. For international travel this includes authorization of the DS2019 form.
- b. Where our son or daughter desires to travel outside the host community unaccompanied by his or her host parent(s), school official or other responsible adult, our son or daughter must obtain written approval for such travel from the YES placement organization and us. For international travel this includes authorization of the DS2019 form.
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- program organization contracts with or uses commercial airlines, trains, buses, restaurants, hotels and other entities whose performance and services cannot be controlled by the Program. Consequently, we agree that the YES program organization is not liable for any of

SIGNATURE OF A PARENT OR LEGAL GUARDIAN:

the actions or negligence of such commercial entities including, but not limited to, lost baggage, uncomfortable accommodations, and travel delays. We further agree that the YES program organization reserves the right to change or alter travel, lodging or other arrangements if it believes such change or alteration to be in the best interest of the participants or the Program.

13. We understand that our son or daughter must return home at the end of the program on the date assigned by the responsible YES program organization. Changes to the assigned departure date will not be made to accommodate graduation, prom or other special school or family events that occur after the assigned date. We understand that the U.S. visa issued to our son or daughter will not be amended or extended beyond the program end date. No exceptions will be made to this policy.

School and Host Family Placement

- 14. We authorize the YES program organizations, employees and representatives to change the place of residence or school designated for our son or daughter when they believe such change to be in the best interest of our son or daughter. We understand that we will be
- notified of any such changes.

 15. We recognize that schools in the U.S. may impose academic standards or other requirements in determining grade level placement that differ from those imposed in the school our son or daughter now attends. We acknowledge and accept that participation in the program does not guarantee credit or graduation from the school our son or daughter now attends or from the U.S. school he or she will attend while participating in the Program. We understand that it is our responsibility to arrange with the school our son or daughter now attends to receive credit or to take exams upon completion of the Program; or to arrange for permission
- receive creat or to take exams upon completion of the Program; or to arrange for permission for academic absence from any institute or university to be attended upon return.

 16. We are aware that the U.S.A. is a multi-racial, multi-ethnic country providing a diversity of possible living experiences and that there is no single living experience that is typical. We understand that placements are made on the basis of criteria designed to determine suitability of host families, and the Program does not discriminate on the basis of race, religion or ethnic origin, either of students or of host families.

 17. We understand that there are strict laws restricting smoking in the U.S. and that the host
- family may have objections to smoking in their home. We agree to honor these laws or restrictions.

Health/Medical Issues

- 18. We confirm that the information stated in the Student Health Certificate is accurate and contains no material omissions of which we are aware. We will immediately inform the YES program organization of any change in information given. We understand that such new information may require reconsideration of our son's or daughter's status in the Program. In the event our son/daughter has a recurrence of any previous illness or anything contracted before leaving home or in the U.S. that is not covered by insurance, we authorize the YES organization to release our child to our care in our country. We will not hold the YES organization responsible for any debts incurred in connection with this permission. We understand that treatment will be provided for injuries sustained by our son or daughter while on
- Program but the extent of coverage is subject to the insurance provider's rules and policies.

 19. We confirm that we have provided a full and complete medical and immunization history on our son or daughter. We understand that U.S. schools absolutely require immunizations, and we agree to allow the Program organization to arrange for all such immunizations which are required for our son/daughter. We understand that such immunizations will be administered according to U.S. medical standards and at no expense to us or our son or daughter.
- 20. As the applicant's parents or guardians, we agree to and do hereby authorize the YES program organization, its personnel and representatives, and the adult members of the host family, to act for us in any emergency, accident or illness.

Termination from the Program

- 21. We understand that our son or daughter may be dismissed from the Program for behavior that the Program, at its discretion, considers detrimental to our son or daughter or to the
- 22. We agree that if we violate any provision of this Agreement, or if our son or daughter, during his or her stay in the U.S does any of the following, then it may be determined that our son or daughter has voluntarily withdrawn from the Program:
- a. is absent without authorization from the host school or the place of residence designated by the YES program organization; or
- b. violates any provision of this Agreement; or
- c. Has misrepresented him or herself in the program application.

 23. If our son or daughter voluntarily withdraws, or is dismissed, from the Program at any time after departure from our country, we understand that his or her scholarship, visa and health insurance coverage are canceled.

Declaration

Parent's written name:

- 24. We have discussed the Program and this Agreement with our son or daughter, and each
- of us fully understands the obligations imposed on us.

 25. We confirm that all information provided in this application is truthful. We understand that any misrepresentation or false answer in this application can be grounds for our son or daughter's elimination from the Program.

Date:

	Last Name	First Name	Middle Name
C. STUDENT AGREEMENT I have read this Agreement and discussed with my parent(s) its terms of			
accept all terms and conditions of this Agreement, and all other rules, regulations and conditions set forth	concerning the I	Program. In parti	cular I will do my best to become
an integral part of my host family, school and community; will travel only in accordance with Paragraphs 9,	10 and 13 of this	Agreement; and	will attend the school designated

for me on a regular basis and complete all work to the best of my ability. I herby certify that the information provided in all parts of this application is truthful. I understand that

my misrepresentation of faise answer can be grownes for my elimination from this program.	
SIGNATURE OF STUDENT:	Date:
hereby attest that the student and the student's parent or legal guardian have signed this document before me.	

GNATURE OF WITNESS:	Written Name:			Date:		
SINATURE OF WITHESS.	written radile:	Last Name	First Name	Middle Name	Duie.	



The policies presented here are the general policies for students. Since variations regarding specific policies and procedures exist among program organizations, it is important that you check with the representatives or office of your program organization in the U.S.A.

PROGRAM ELIGIBILITY REQUIREMENTS

Participation on the Program: Applicants will be considered for a scholarship to participate on this Program if:

- 1. No immediate family member has applied at any time for permission to emigrate to the U.S.A. or for a green card;
- 2. The applicant meets the YES age and grade (class) requirements for his or her country; and
- 3. The applicant is a legal citizen of the country from which he or she applies.

GENERAL POLICIES

- Internet: Students are required to follow ALL RULES regarding use of the computer (regardless of whose property it is) and the Internet as determined by his/her placement organization, host family and/or host school. Students who place private (contact information, pictures, etc.) or inappropriate information on the Internet may be dismissed from the program. The rules are intended to protect students' safety and are based on federal guidelines and laws governing what can and cannot be posted online. Violation of any of these rules may result in dismissal from the program or criminal charges. Students who in any way put the safety of themselves or others at risk by misusing the Internet may be dismissed from the program
- Dangerous/risky activities: The following activities have been determined by most insurance companies to be too risky, and treatment for injuries sustained while participating in the them will not be covered by insurance: driving any motorized vehicle (such as a car, motorcycle, all-terrain vehicle, etc.) hang gliding, bungee jumping, jumping on a trampoline, parachute jumping, parasailing, scuba diving, piloting a private plane, mountain biking, mountaineering, rock climbing, skate boarding, extreme sports, handling or using a firearm or other weapon and any other such activities prohibited by your placement organization.
- Driving: Exchange students are not permitted to drive any motorized vehicle under any circumstances. Violators of this policy will be considered for program
 dismissal. This applies even if they are in possession of an International driver's license or if the host family feels that the student is a responsible and
 careful driver. Exceptions may be granted for farm equipment if allowed by the student's program organization. If authorized, the student must observe
 precautions regarding safety and legal limitations.
- Employment: The J-1 visa permitting the student to stay in the U.S.A. restricts employment. Program participants may seek only part-time, small jobs such as babysitting, yard clean-up, etc., according to specific regulations of program organizations.
- Marriage: Married students are not permitted on the Program. If marriage occurs while the student is a participant or is discovered to have occurred prior to the student becoming a participant, the student will be considered for Program dismissal.
- Pregnancy: If a program participant is found to be pregnant she must return to her home country. Male students who cause pregnancies also must return home.
- Student expenses: The Program provides visas, travel arrangements, host family and school placements, allowances and insurance. The Program is not responsible for additional student expenses beyond the incidentals allowance, monthly pocket allowance, and official program activities and travel. The host family is responsible for three meals a day for the student and must provide EITHER lunch money OR a bag lunch if the school does not provide free lunches for the student and the student cannot go home for lunch. All other expenses, such as extra school fees or activities, social activities, personal and hygienic supplies, postage and telephone calls, are paid by the student using Program allowances.

TRAVEL POLICIES

- Return to home country at the end of the Program: all students must return to their home country at the end of the program on the date assigned by the
 responsible YES program organization. Students will not be allowed to remain in the U.S.A after their assigned return-travel date. Those who do not
 adhere to this will be reported to the Department of Homeland Security and U.S. Immigration and Customs Enforcement and will have their program
 insurance cancelled.
- · Student travel: It is the policy of the Program that only authorized student travel is permitted. Authorized student travel must meet these three criteria:
 - The YES placement organization has knowledge of the student's location and approves the travel in advance, and/or the program organizations
 have obtained the natural parents' written permission for the travel;
 - 2. The student's safety is assured to the greatest extent possible;
 - 3. The travel does not interfere with school attendance.
- Visits with natural family, home country friends or relatives who live in the US: Such visits are strongly discouraged during the program year, especially during the initial adjustment period. Such visits interrupt the continuity of the relationship with the host family and may diminish the exchange experience for the student and host family. Policies vary by placement organization.
 Visits to the home country while on Program: Such visits are not allowed. Exceptions may be made, contingent upon funding and Program approval, in
- Visits to the home country while on Program: Such visits are not allowed. Exceptions may be made, contingent upon funding and Program approval, in
 case of the death or imminent death of an immediate (mother, father, brother, sister) family member. An unauthorized visit will result in dismissal from
 the Program. Such non-emergency trips break the continuity of the relationship with the host family and may diminish the exchange experience for the
 student and host family. Any requests for exceptions must be presented to the YES program organization in the U.S.A. and approved by the U.S.
 Department of State.

SCHOOL AND HOST FAMILY PLACEMENT

- School attendance: All program participants must attend a high school and maintain a normal course of school work. Non-attendance may result in consideration for Program dismissal or determining that the student has left the Program.
- School performance: Allowing for an initial period of linguistic and/or academic adjustment, a student must achieve and maintain adequate academic results. After a reasonable period of time, poor motivation, under-achievement, or inappropriate behavior in combination with poor family adjustment, may be cause for Program dismissal.
- School expulsion: If a student is expelled from school, that student will be considered for Program dismissal.
- YES students cannot be hosted by natural family members.

HEALTH/MEDICAL

Medical treatment of a student (including emergencies): Before a student arrives in the U.S.A., the Program must receive written permission from natural
parents to obtain emergency medical attention if needed (see Permission for Care of My Child). Students will receive complete medical attention in case
of an accident or emergency. Each insurance provider has specific policies and restrictions governing the types of expenses they will reimburse. YES
Program organizations, their representatives and host families are not responsible for any medical bills, not covered by insurance, incurred by a student
regardless of who signs a hospital admission form. The Program also is not responsible for any negative results because of medical treatment.

TERMINATION

- Leaving the Program early: If the student is absent from the host family, school or other place to which the Program has assigned him or her, without obtaining the written approval of the Program, the Program may determine that the student has left the Program through his or her own voluntary action. In this case, the Program is absolved from all obligations, legal or otherwise, to the student or his/her parents or guardians for the student's current or future well-being. The Program will, if the circumstances warrant, work with the student to return to the Program. However, if this cannot be accomplished, a decision will be made that the separation from the Program is final, and the student will receive a letter from the Program sponsor indicating that the student has been reported to the Department of Homeland Security and U.S. Immigration and Customs Enforcement. The student's medical insurance will be cancelled.
- Unauthorized travel may constitute termination from the Program: The YES placement organizations in the U.S.A. determine authorization for travel.
 Procedures for obtaining permission to travel vary by organization.

ILLEGAL ACTIVITY

- Alcohol: Students are required to observe all U.S. laws with regard to the minimum drinking age. Minimum drinking age in the U.S. is 21. The student
 will be considered for program dismissal.
- Drugs: Program participants may not possess or use drugs that are illegal in the U.S. Violators of this policy may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Theft/shoplifting: Students involved in theft (either from an individual or from a place of business) or shoplifting may be dismissed from the Program and are subject to prosecution by the U.S. legal system.
- Violation of the law: If a student is found to have violated a U.S. law, is arrested, and/or is charged with a crime, the student may be dismissed from the Program but is first subject to prosecution by the U.S. legal system.



STUDENT NAME:				
	Last Name	First Name	Middle Name	

Form 8 minor participant name and/or likeness release

I hereby consent to and authorize the use of my name or likeness (or the name or likeness of my child) in connection with participation in the United States Department of State ("DOS")-sponsored exchange program, the Kennedy-Lugar Youth Exchange and Study (YES) Program.						
I understand and give my consent that this use may include, but is no likeness, images and/or written materials.	ot limited to, any photographic, video or other recording of my words,					
DOS and the participating organizations shall have the right to exhibit, reproduce, distribute, display or otherwise use my name and/or likeness in all media or technology now known or hereafter developed, and may assign such rights to third parties.						
	OR					
I do not authorize the use of my (or my child's) name or likene	ss.					
Please sign below to indicate your choice:						
Student Signature	Parent or Legal Guardian Signature					
Date	Date					
Student Printed Name (First, Middle Last)	Parent or Legal Guardian Printed Name					
Student Home City and Country						



(same parent or legal guardian as on Forms 7 and 8)

STUDENT NAME:			
	Last Name	First Name	Middle Name

Form 9 PERMISSION FOR CARE OF MY CHILD

STUDENT INFORMATION			
Last (Family) Name:	First Name:	Middle Name:	
Gender (circle one): Male Female	Age:	Birthdate:	day/month/year
Fill out the information in the lines above. permission for care. Return this document of			•
PERMISSION FOR CARE (STATEM	MENT TO BE SIGNED BY Y	OUR PARENT)	
My son/daughter has my permission to take ticipating organization or the host family in the event my son/daughter has a recurrence authorize the participating organization to reany debts incurred in connection with this pethe U.S. can be released to program represe	the U.S to act for me in any emergen e of any previous illness or anything elease my child to my care in my cou ermission. In addition, I agree that n intatives, including American Council	cy or accident or illness or need contracted before leaving hom untry. I will not hold the organi nedical or other legal records o	d for immunization. In ne, I, the undersigned zation responsible for of my son/daughter in
PRINT NAME OF PARENT OR LEGAL GUAR			
	Last Name	First Name	Middle Name
RELATIONSHIP TO STUDENT:			
SIGNATURE OF PARENT OR LEGAL GUARD			DATE:
(same parent or legal quardian as on Forms 7 a	nd 8)		day/month/year



OFFICIAL USE ONLY.	TC

STUDENT HEALTH CERTIFICATE

PART A - INSTRUCTION TO THE STUDENT

Form 10

			n all parts are completed, return t							
Student's name:				Date of Birth:				Sex:	М	F
	family name	first name	middle i	name (d	lay	month	year)		(circle	one)

It is important that this form he filled out completely and accountely. THIS FORM MIST BE FILLED OUT IN ENGLISH. Complete DART A. Your physician much

PART B - MEDICAL CERTIFICATION (TO BE COMPLETED BY YOUR MEDICAL DOCTOR)

This student may be participating in a program that involves living in the U.S.A. with a host family. Please give especially detailed information on any medical or psychological

conditions that would be of concern during this student's stay in the U.S.A. Please write clearly in black pen in English. Upon completion of this form, please return it to the student. Thank you for your assistance.

1. MEDICAL HISTORY. Has the student ever received treatment, attention or advice from a physician or other practitioner for, or been told by any physician or practitioner that he/she had (circle Yes or No for each question):

1.1	Allergies to Medications or Vaccines	Yes	No	1.12	Chronic or recurrent Kidney or Urinary			1.24	Hearing Impairment	Yes	No
1.2	Other Allergies	Yes	No		Tract Disease	Yes	No	1.25	Anorexia/Bulimia	Yes	No
1.3	Asthma	Yes	No	1.13	Persistent or Recurrent Headache	Yes	No	1.26	Psychiatric Problem or Illness	Yes	No
1.4	Tuberculosis	Yes	No	1.14	Seizure Disorder (Epilepsy)	Yes	No	1.27	Learning Disability	Yes	No
1.5	Chronic or recurrent Respiratory Disease	Yes	No	1.15	Other Neurologic Abnormality or Disease	Yes	No	1.28	Sexually Transmitted Diseases	Yes	No
1.6	Rheumatic Fever	Yes	No	1.16	Thyroid Abnormality or Disease	Yes	No	1.29	HIV/AIDS	Yes	No
1.7	Disease or Abnormality of the Heart	Yes	No	1.17	Diabetes Mellitus	Yes	No	1.30	Hepatitis	Yes	No
1.8	Chronic or recurrent Upper			1.18	Other Endocrine Abnormality or Disease	Yes	No	1.31	Chicken Pox	Yes	No
	Gastrointestinal Disorder	Yes	No	1.19	Chronic or recurrent Arthritis	Yes	No	1.32	Measles	Yes	No
1.9	Chronic or recurrent Lower			1.20	Muscle Disease or Skeletal Abnormality	Yes	No	1.33	Mumps	Yes	No
	Gastrointestinal Disorder	Yes	No	1.21	Chronic or recurrent Skin Condition	Yes	No	1.34	Rubella	Yes	No
1.10	Abnormal Weight Loss or Weight Gain	Yes	No	1.22	Cancer or Leukemia	Yes	No	1.35	Other childhood diseases	Yes	No
1.11	Enuresis (Bedwetting)	Yes	No	1.23	Eye Abnormality or Disease	Yes	No				

IF ANY OF THE ABOVE ITEMS IS ANSWERED "YES", PROVIDE DETAILS BELOW (PLEASE IDENTIFY BY ITEM NUMBER):

Item No.	Date of last symptoms or attack	Specific diagnosis; date of diagnosis; severity and frequency; current treatment (including medications); physical or dietary limitations; need for ongoing care				
Example 1.31	Sept. 15-21, 2009	Chicken pox, without complications. Bed rest. No further treatment needed.				

2. IMMUNIZATION RECORD. An accurate and complete record will be required for the student to enter school in the U.S.A. Please record all dates <u>DAY</u>. MONTH. YEAR for all doses of the following vaccines (since birth):

2.1 Can the student receive immunizations? 🖵 Yes 🔲 No If no, explain:							
2.2 Diphtheria, Pertussis and	DOSE 1	DOSE 2	DOSE 3	DOSE 4	BOOSTER DOSE (must be within past 9 years)		
Tetanus Vaccines	Date:/	Date: //	Date: //	Date: //	Date://		
2.3 Poliomyelitis (trivalent oral):	DOSE 1	DOSE 2	DOSE 3	DOSE 4			
Check which series:	Date: //	Date: //	Date:/	Date: //			
4 doses 8 doses	DOSE 5	DOSE 6	DOSE 7	DOSE 8			
	Date: //	Date: //	Date: //	Date: //			
2.4 Measles/Mumps/Rubella:	DOSE 1	DOSE 2	5. (1)	Date of Rubella			
	Date of measles (Rubeola):	Date of measles (Rubeola):	Date of Mumps:	(German Measles):			
	<i>//</i>	<i>//</i>	//	<i>//</i>			
2.5 For Tuberculosis:	DOSE 1	DOSE 2					
BCG	Date: //	Date: //					
2.6 Hepatitis B:	DOSE 1	DOSE 2	DOSE 3				
	Date: —_//	Date://	Date: //				
2.7 Additional doses or other vaccinations:	VACCINE	VACCINE	VACCINE	VACCINE	VACCINE		
(for example, Chicken Pox, H1N1)	Date: //	Date: //	Date: //	Date: //	Date: /		

STUDENT HEALTH CERTIFICATE

3.	 SCREENING FOR PULMONARY TUBERCULOSIS. In order to enter school in the U.S.A., it is required that the student be screened for Tuber 3.1. All students must provide the results of a tuberculosis skin test performed after September 1, 2010. 	rculosis.	
	Exception: If the student has ever had a skin test result of 10mm or greater, please provide the date of the last skin test (below) and the chest X-ray (#3.3 below).	date of the last i	normal
	Skin test result: size: date (day/month/year):		
	3.2. Does the student currently have any of the following symptoms? (circle all that apply)		
		plained weight lo	oss
	3.3. If the skin test result is 10mm or greater, or any item in #3.2 is circled, get a chest X-ray and provide the results:	g	
	Chest X-ray result: date (day/month/year): (circle one) NORMAL (-) ABNORMAL (+)		
4 .	4. PHYSICAL EXAMINATION. Please complete the following based on your physical examination of the student:		
	Date of Examination — Height: — Weight: — Blood Pressure: — (systolic) (diastolic) Pulse -		
		(beats per min	nute)
	Is there or has there been any abnormality of (circle Yes or No for each question)? IF "YES", PROVIDE DETAILS BELOW (PLEASE IDENTIFY BY I	•	
	4.1. Eyes Yes No 4.6. Abdomen or Abdominal Organs Yes No 4.11. Brain or Nervous System 4.2 Ears Yes No 4.7. Urinary System Yes No 4.12. Skin	Yes N Yes N	No No
	4.3. Nose or Throat Yes No 4.8. Thyroid Gland or Endocrine System Yes No 4.13. For Women: Breast, Ovaries or G		No
	4.4 Lungs or Respiratory System Yes No 4.9. Bones or Joints Yes No For Men: Testes or Genitalia 4.5. Heart or Cardiovascular System Yes No 4.10. Muscles or Skeletal System Yes No	Yes N	No
	Item No. Specific diagnosis; date of diagnosis; severity of abnormality; recommended treatment (including medications or surgery); need for follow-up care		
			<u>.</u>
•			
5 .	5. QUESTIONS FOR THE PHYSICIAN. Circle Yes or No for each question. IF "YES", PLEASE DESCRIBE:		
	5.1. Has the student ever had surgery not revealed in previous questions? Yes No		
	5.2. Has the student ever received inpatient care in hospital, clinic, or sanatorium? Yes No		
	5.3. Has the student been advised to have surgery or additional medical care? Yes No		
	5.4. Has the student taken any prescribed medication in the past 6 months?(name, dose, etc.) Yes No		
	Will the student continue to take this prescribed medication in the U.S.A.? Yes No		
	5.5. Does the student have any limitations in physical activity? Yes No		
	5.6. Is the student required to observe any dietary restrictions for health reasons? Yes No		
	5.7. Is the student significantly overweight or underweight? Yes No		
	5.8. Has the student ever consulted a psychologist or psychiatrist? 5.9. Has the student ever abused drugs such as alcohol, opiates, or barbiturates? Yes No		
	5.10. Does the student wear eyeglasses or contact lenses? 5.11. Is there any medical reason why the student should not participate in this program? Yes No		
	5.12. In your opinion, what is the general state of the student's health (circle one) EXCELLENT GOOD	POOR	
Но	How long has this person been your patient? Years Months		
	If known less than a year, do you know this student's complete medical history? YES NO (circle one)		
Ph	Physician's name: PHYSICIAN'S SIGNATURE: DATE: (day,	/month/year) PI	HYSICIAN'S
nl.	Physician's postal index: Country: City:	· moniny year /	STAMP
	Work Address:		
		/EADI	
	PART C - DENTAL CERTIFICATION (TO BE COMPLETED BY YOUR DENTIST WITHIN THE PAST Y	EAR):	
	1. Are the student's teeth and gums in healthy condition? Yes No (circle one) DATE OF EXAMINATION:	/vear)	
	1.2 If dental work is needed, provide the date it was completed, or will be completed. Date (day/month/year)	. ·	
	2. The student wears: fixed braces YES NO (circle one) removable orthodontia devices YES NO (circle one)		
	2.1 If the student wears fixed braces, will they be removed before the student departs for the U.S.A.? YES NO (circle one)		
	2.2 Is any follow up required on braces? YES NO (circle one)		
۷.4	2.2 Is any follow up required on bracess YES NO (circle one) If yes, explain:		
De		/	
	in the second se	/month/year) [DENTIST'S
De	Dentist's postal index: Country: City:	_ \	STAMP
Ad	Address:	\	



APPLICATION INSTRUCTIONS

Carefully read these instructions, and the instructions on each of the forms, before you begin to fill out the application. You will not be able to receive another application if you make any mistakes, so it is best to make a copy of the application before you begin. The application must be filled out in black ink. Instructions are given for many, but not all, questions. All signatures should be as they appear in your passport. Return the completed application and one copy (except Form 4) to your YES office by the date indicated on Form 1 of the application. Please keep a copy for your files.

FORM 1: Do not write anything in the space in the top right hand corner where it is written **OFFICAL USE ONLY**. Write your full name on each form **exactly** as it appears on the top of Form 1 and in your passport.

Name (in local language) - Write your name in the language of your country.

Today's Date - The date you fill out the application.

Due Date - The date that your application is due at the designated office. If your application is received after the due date, even if it is in the mail, it will not be considered.

STUDENT INFORMATION

Family name or last name, as written in your passport.

Middle Name, if any - If you do not have a second or middle name, write NONE.

Gender - Circle Male or Female.

Age - Indicate your age on the day your application is due.

Birthdate - The day, month, and year that you were born. Circle the appropriate month.

Place of birth - The name of the city, town, or village where you were born. If the name has changed, write the current name.

Country of birth - The name of the country where you were born. If the name has changed, write the current name.

Citizenship – If you are a citizen of more than one country, write only the name of the country where you will receive your international passport. It must be the country in which you are applying.

Postal Index - Please be sure to put your correct postal index.

Country - The country where you currently live.

City - The city, town, or village where you currently live.

Address - The actual address where you live. Do not translate the address. Write it as it sounds in your native language.

Home telephone - You must include the city code. If you do not have a home telephone write NONE.

Other telephone number where you can be contacted -You must fill out this blank. You may write the phone number of a relative or a friend.

FAMILY INFORMATION

You must include information about both parents. If your parent is no longer alive, write DECEASED. If you do not know who or where they are, write UNKNOWN. The YES program needs to have information on the people who are legally responsible for you and make decisions for you. This may include a stepparent or a parent who does not live with you.

MOTHER and FATHER - Current family name - The name that is written in his or her passport.

If someone other than your mother or father is legally responsible for you, write LEGAL GUARDIAN after his or her name in the space for mother or father.

Work, home and mobile telephone numbers: You must include the city code. Mobile number: If your mother and father do not have mobile phones, write NONE.

SCHOOL INFORMATION

School (city and number or city and name) - the city where the school is located and number of the school (or the name of the school).

Do not translate the name into English. Write it as it sounds in your native language.

Circle the class in which you currently study. If your class is not shown, write your class in the blank after other. The address and telephone number of the school as well as the name of the school director must be included. If your school has a website and/or an email address, indicate the addresses in the blanks.

FORM 2: Write your name at the top of the form. Fill out this form truthfully. If you write that you play basketball three (3) times a week or enjoy swimming, you may be expected to participate in these activities in the U.S.

Section 3 must be filled out completely. If you have never participated in an international exchange program, or lived outside your country, write NONE.

FORM 3: Write your name at the top of the form. You may use a dictionary. Use only the page provided. Extra pages will be discarded.

FORM 4: This form should be filled out by a teacher who knows you well. If you cannot choose a teacher you may ask the school director, or a teacher from a school you have recently attended. Before you give the form (and the attached envelope) to your teacher, write your full name at the top, as well as the name of your school, and circle the class in which you study. If your class is not shown, write your class in the blank after other.

If your teacher knows English, he or she should fill out the English version of Form 4. The English version must be signed by the teacher and have the school stamp. If you cannot get a school stamp, you must provide an explanation. If your teacher knows English, the Translator's Statement is left blank and the local language Form 4 is NOT turned in.

If your teacher does not know English, he or she should fill out the version of Form 4 provided (in local language). This version must be translated, in English, onto the English Form 4. The English Form 4 must be signed by the teacher and have the school stamp. The Translator's Statement must be filled out by the translator. Neither the applicant nor a member of the applicant's family may translate Form 4.

Both the English and local language versions (if original is not in English) of Form 4 must be returned with the application in the <u>envelope provided</u>, <u>sealed</u> and with the <u>recommender's signature across the seal</u>.

FORM 5: Write your name at the top of the page. Answer these questions honestly. They are not used during the selection process. They are used to find an American family for you to live with.

FORM 6: Write your name at the top of the page. Attach two (2) current photos to this form showing you and your family or friends. Photos should not display cigarettes, alcohol, revealing clothing or bare stomachs, or weapons (knives, guns). Indicate which person you are. Photos will not be returned. Put six (6) passport size photos in a separate (your own) envelope. Smile for this photo! On the envelope, in English, write your complete name, date of birth, and your hometown. Attach the envelope to the back of **Form 7**.

FORM 7: You must complete the three English copies of Form 7. Attach two copies to the application. You keep one copy of the English form. Each copy of the English form must have your signature, the signature of one of your parents, or legal guardian, the signature of a witness (the witness must be an adult and may not be the other parent; however, the witness can be a family member), and the date that Form 7 was signed. If Form 7 is signed by your legal guardian, please underline LEGAL GUARDIAN.

FORM 8: You and your parents need to make a choice and sign this form. It must be the same parent who signs Form 7.

FORM 9: Only one parent needs to sign this form. This allows you to receive emergency medical treatment, If this form is signed by your legal guardian underline LEGAL GUARDIAN. This form may not be signed by a relative who is not your legal guardian. It must be the same parent who signs Forms 7 and 8.

FORM 10: This form needs special attention. Form 10 must be filled out in English. You should complete Part A. You may attach an extra page to Form 10 if there is not enough space to explain an illness or other health related issue.

Part B: Section 1: The doctor must provide an explanation for any question answered YES.

Section 2: This section must be filled out completely and accurately. If you have not received an immunization write a dash (-) in the blank. Section 3: You must provide the results of a tuberculosis skin test performed after September 1, 2010. Indicate the size and date of the skin test (3.1). If the result of the skin test is 10 mm or greater, or if any item in 3.2 is circled, you must also get a chest x-ray and provide the date and result of the chest x-ray (3.3).

Section 4: Information needs to be given about your height, weight, blood pressure, and pulse. The doctor must provide an explanation for any question answered YES.

Section 5: The doctor must provide an explanation for any question answered YES. The doctor must circle one of the options in point 5.12. Form 10 must contain the physician's signature, the date s/he signed the form and the physician's or medical institution's stamp.

Part C: Form 10 must contain the dentist's signature, the date s/he signed the form and the dentist's stamp. The dentist must answer all of the questions, and explain where indicated.

Secondary School Transcript of Grades: In addition to your current year transcript, you must submit a certified copy of your last three years' transcript of school grades. If necessary, include transcripts from previous schools. The transcript should be official and have the stamp of your school.

- o Read all instructions before beginning
- o Be truthful

- o Write clearly and in black ink
- o Additional materials will be discarded



STUDENT NAME:			
	Last Name	First Name	Middle Name

STUDENT GRADE TRANSCRIPT TRANSLATION

INSTRUCTIONS

Position: __

Complete this form based on the transcript the student provides. Give the grading scale for each academic year (for example, either 1-10, 1-100, etc.).									
STUDENT & SCHOOL INF	FORMATION	N .							
School Name:									
Is this a boarding school?	Yes 🖵 No	(Class (circle o	ne): 8 9 1	10 11 12 d	other			
Address:									
Type of school: public] private 🔲	other, explai	in						
71 –1 –		, ,							
	Academic Year 2007-2008 Class ———————————————————————————————————		Academic Year 2008-2009 Class ———————————————————————————————————		Academic Year 2009-2010 Class ———————————————————————————————————		Academic Year 2010-2011 Class Grading Scale:		
SUBJECT	Local Final Marks	U.S. Equivalent	Local Final Marks	U.S. Equivalent	Local Final Marks	U.S. Equivalent	Local Current Marks	U.S. Equivalent	
SIGNATURE:					Date:				
Printed name:					_ Recomme	Recommended U.S. grade:			