

OFFICE USE ONLY

Exchange

Full Fee

Student Choice

Match

Last name (as per passport)		First name (as per passport)		Middle name(s) (as per passport)	
Street address			Chosen host country		
Suburb	State	Postcode		Duration	Arrival month
City/town	Country		<input type="radio"/> Calendar Year	<input type="radio"/> January/February	<input type="radio"/> March/April
Phone number + area code	Fax number + area code (if available)		<input type="radio"/> Academic Year	<input type="radio"/> July/August/September	<input type="radio"/> November
Student's Email (if available)	Family's Email (if available)		<input type="radio"/> Semester	<input type="radio"/> Short-term (2–3 months)	<input type="radio"/> Other:
			Year of departure		
			Student's mobile phone number		

How did you learn about this program?

Sex	Date of birth (day–month–year)	City + country of birth (as per passport)
Native language	Country of legal residence	Nationality

Father's last name	Father's first name	Father is <input type="radio"/> living <input type="radio"/> deceased	Father's age
Father's address, if different from above		Father's mobile phone number	
Father's occupation	Father's business phone number	Father's email address	
Mother's last name	Mother's first name	Mother is <input type="radio"/> living <input type="radio"/> deceased	Mother's age
Mother's address, if different from above		Mother's mobile phone number	
Mother's occupation	Mother's business phone number	Mother's email address	

Parents are (if applicable) separated divorced

Student is living with

If divorced, who has custody of student? father mother other.....

If divorced or separated, who should receive program information? father mother mother + father other.....

Brothers' + Sisters' first name	Age + Sex	Living at home (yes or no)	Occupation
–	–	–	–
–	–	–	–
–	–	–	–
–	–	–	–

Emergency contact number (other than mother and father)

Name: Phone number: Relationship:

PLEASE RATE YOUR INTEREST FOR THE FOLLOWING: ●●● High ●●○ Medium ●○○ Low ○○○ No Interest

<input type="radio"/> <input type="radio"/> <input type="radio"/> reading	<input type="radio"/> <input type="radio"/> <input type="radio"/> attending theatre	<input type="radio"/> <input type="radio"/> <input type="radio"/> soccer/football/rugby	<input type="radio"/> <input type="radio"/> <input type="radio"/> tennis
<input type="radio"/> <input type="radio"/> <input type="radio"/> watching TV	<input type="radio"/> <input type="radio"/> <input type="radio"/> going to the movies	<input type="radio"/> <input type="radio"/> <input type="radio"/> volleyball	<input type="radio"/> <input type="radio"/> <input type="radio"/> cycling
<input type="radio"/> <input type="radio"/> <input type="radio"/> painting/drawing	<input type="radio"/> <input type="radio"/> <input type="radio"/> visiting museums/galleries	<input type="radio"/> <input type="radio"/> <input type="radio"/> basketball	<input type="radio"/> <input type="radio"/> <input type="radio"/> skiing
<input type="radio"/> <input type="radio"/> <input type="radio"/> computers	<input type="radio"/> <input type="radio"/> <input type="radio"/> social dancing	<input type="radio"/> <input type="radio"/> <input type="radio"/> dancing (ballet, modern...)	<input type="radio"/> <input type="radio"/> <input type="radio"/> golf
<input type="radio"/> <input type="radio"/> <input type="radio"/> listening to music	<input type="radio"/> <input type="radio"/> <input type="radio"/> drama	<input type="radio"/> <input type="radio"/> <input type="radio"/> hockey/cricket/baseball	<input type="radio"/> <input type="radio"/> <input type="radio"/> martial arts
<input type="radio"/> <input type="radio"/> <input type="radio"/> writing/poetry	<input type="radio"/> <input type="radio"/> <input type="radio"/> discussing current events	<input type="radio"/> <input type="radio"/> <input type="radio"/> horse riding	<input type="radio"/> <input type="radio"/> <input type="radio"/> camping
<input type="radio"/> <input type="radio"/> <input type="radio"/> swimming/surfing	<input type="radio"/> <input type="radio"/> <input type="radio"/> youth club member	<input type="radio"/> <input type="radio"/> <input type="radio"/> gardening	<input type="radio"/> <input type="radio"/> <input type="radio"/> collecting items
<input type="radio"/> <input type="radio"/> <input type="radio"/> kayaking/canoeing	<input type="radio"/> <input type="radio"/> <input type="radio"/> playing cards + games	<input type="radio"/> <input type="radio"/> <input type="radio"/> travel with parents/friends	<input type="radio"/> <input type="radio"/> <input type="radio"/> sightseeing
<input type="radio"/> <input type="radio"/> <input type="radio"/> hiking/trekking	<input type="radio"/> <input type="radio"/> <input type="radio"/> cooking	<input type="radio"/> <input type="radio"/> <input type="radio"/> singing	<input type="radio"/> <input type="radio"/> <input type="radio"/> fitness
List musical instruments played:		<input type="radio"/> <input type="radio"/> <input type="radio"/> sailing	<input type="radio"/> <input type="radio"/> <input type="radio"/> other:

PLEASE INDICATE YOUR PERSONALITY TRAITS:

<input type="radio"/> active	<input type="radio"/> outgoing	<input type="radio"/> curious	<input type="radio"/> friendly	<input type="radio"/> humourous	<input type="radio"/> independent
<input type="radio"/> open	<input type="radio"/> intellectual	<input type="radio"/> talkative	<input type="radio"/> mature	<input type="radio"/> motivated	<input type="radio"/> sincere
<input type="radio"/> reliable	<input type="radio"/> optimistic	<input type="radio"/> organised	<input type="radio"/> patient	<input type="radio"/> quiet	<input type="radio"/> spontaneous
<input type="radio"/> shy	<input type="radio"/> realistic	<input type="radio"/> reserved	<input type="radio"/> respectful	<input type="radio"/> responsible	<input type="radio"/> studious

What is your religion? (answer not mandatory)		Do you attend religious services? (answer not mandatory) <input type="radio"/> often <input type="radio"/> occasionally <input type="radio"/> rarely <input type="radio"/> never	
Do you smoke? <input type="radio"/> yes <input type="radio"/> no	If smoking, are you ready to stop? <input type="radio"/> yes <input type="radio"/> no	If not smoking, can you adjust to a smoking family? <input type="radio"/> yes <input type="radio"/> no	If family is smoking outside only? <input type="radio"/> yes <input type="radio"/> no
Are you afraid of pets? (if yes, which ones?) <input type="radio"/> yes <input type="radio"/> no		Do you have allergies? (if yes, please explain) <input type="radio"/> yes <input type="radio"/> no	
Are you vegetarian? <input type="radio"/> yes <input type="radio"/> no		Do you have any dietary intolerances? (if yes, please explain) <input type="radio"/> yes <input type="radio"/> no	
Are you presently under a doctor's care? (if yes, please explain) <input type="radio"/> yes <input type="radio"/> no		Do you take any medication? (if yes, please explain) <input type="radio"/> yes <input type="radio"/> no	

Current year level (at time of application)	Foreign languages studied	Years study	Level reached
What is your major subject or academic stream at school?	-	-	-
Give your overall school result of last year	-	-	-

I confirm my candidacy to the Secondary School Program and certify that the information provided above is true and correct. I agree to follow the rules of the host country, hosts, education department and school(s) in which I am placed.

SENDING ORGANISATION STAMP

signature of student + date & 'read and approved'

signature of legal guardian(s) + date & 'read and approved'

Please place a minimum of 5 high quality photos — maximum 10 (please add further pages if necessary):

- of you and your family where you live, frequently go or do things you normally like to do;
- of yourself involved in sports, hobbies and other activities that illustrate your interests.

These photos are for your hosts (photos are not returned) so we encourage you to include those photos which best express you, your surroundings and your interests. Please remember to write a short sentence describing each photo.

Digital photos are acceptable but they need to be of high resolution, good colour and printed on good quality photo paper.

Your hosts need to know a great deal about you. Please answer the following questions in detail, completely and honestly. Misunderstandings can occur later if students fail to give a host family full answers to the questions. Thank you. PLEASE CLEARLY WRITE ANSWERS IN COMPLETE SENTENCES AND BLACK INK!

ABOUT YOU

1. What qualities do you think you have that will make you a successful exchange student?
2. What qualities do you value most in others?.....
3. What is unique and different about you?
4. What are your favourite and least favourite subjects at school?.....
5. Many students have dreams, aspirations and passionate pursuits. Please describe any you have.....

ABOUT YOUR FAMILY

1. Describe your relationship with your parents.
2. Describe your relationship with your siblings.....
3. Describe the activities your family pursues together.....
4. What are the rules you must respect in your family?.....
5. What household chores do you perform at home?

ABOUT YOUR ACTIVITIES

1. How many hours do you spend studying per day outside school?
2. What time do you usually go to bed?
3. Other than studying and watching TV, you mainly spend your time doing ... (describe hereunder your 3 main activities)
#1 #2 #3

YOU IN YOUR HOST COUNTRY

1. Why have you chosen your host country?
2. Why have you chosen an immersion program, living with a host family and attending school daily?
3. Give at least two reasons why you want to study abroad (other than second language skills).
4. What do you expect from your school?
5. What do you expect from your school mates?

A l'attention de la direction

Madame, Monsieur

L'étudiant(e) qui vient de vous remettre le formulaire ci-joint a posé sa candidature à notre programme d'une année ou un semestre académique à l'étranger. La participation de cet(te) étudiant(e) dépend bien sûr de l'acceptation de son dossier par une école dans le pays d'accueil choisi. Les directeurs d'écoles à l'étranger vont interpréter les résultats scolaires en fonction de leur propre système (qui peut être très différent du nôtre). Afin de faciliter leur prise de décision nous vous serions très reconnaissants de bien vouloir compléter le formulaire joint de la façon suivante:

- 1) donner le résultat scolaire de fin d'année, pour les trois dernières années accomplies
- 2) si l'étudiant a un échec dans une branche:
 - indiquer le résultat de l'examen de rattrapage à la place du résultat de fin d'année
 - si l'étudiant a réussi l'examen de rattrapage mais qu'aucun résultat n'a été attribué pour cet examen, il faut indiquer 'P' (Passed) à la place du résultat de fin d'année
 - si l'étudiant a un échec mais qu'il a pu passer dans l'année supérieure sans examen complémentaire, il faut indiquer 'P' (Passed) à la place du résultat de fin d'année.

Remarque importante

L'étudiant(e) dispose de 15 jours pour compléter son dossier de candidature. Merci de bien vouloir remettre au/à le/la candidat(e), le présent document et le formulaire joint dès que possible. Si vous avez des questions, n'hésitez pas à nous contacter au 02/534 53 50. Nous vous remercions de votre collaboration.

nom du responsable + signature + date

nom de l'établissement scolaire

Veillez indiquer ci-dessous le système d'évaluation en vigueur dans votre établissement.

La conversion des résultats sera effectuée par nos soins.

Wilt U zo goed zijn hierna het puntensysteem geldig in Uw school aan te duiden.

De omzetting van de resultaten wordt door ons verzorgd.

Ter attentie van de directie

Geachte Mevrouw, Mijnheer,

De student(e) die U het hierbijgevoegd formulier heeft overhandigd heeft haar (zijn) kandidatuur gesteld voor een schooljaar of een semester in het buitenland. De deelneming van deze student(e) hangt uiteraard af van de aanvaarding door de school in het gastland. De schooloversten in elk land waar wij dergelijk programma aanbieden zullen de schoolresultaten interpreteren volgens hun eigen evaluatiesysteem (dat sterk kan verschillen van het onze). Om hen het nemen van een beslissing te vergemakkelijken, zouden wij U willen vragen het bijgevoegd formulier op de volgende wijze te willen invullen:

- 1) de eind resultaten te geven van de drie voorgaande schooljaren
- 2) indien de student ooit een herexamen heeft gehad de uitslag van het herexamen te geven:
 - i.p.v. het resultaat op het eind v.h. jaar
 - indien de student geslaagd was voor het herexamen, maar men heeft hem geen punten daarvoor toegekend, dan kunt U een 'P' (passed) aanduiden.
 - indien de student niet geslaagd was voor een vak, maar toch het volgend schooljaar mocht beginnen, ook dan de 'P' aanduiden i.p.v. de punten.

Belangrijke opmerking

De student heeft 15 dagen om zijn dossier in te vullen. Wij zouden U dus heel erg dankbaar zijn mocht U het bijgevoegd formulier, ingevuld, zo vlug mogelijk aan de student willen terugbezorgen. Wij danken U hartelijk voor Uw medewerking. Indien U meer informatie wenst kunt U ons altijd bellen op nr 02/534 53 36.

naam van de verantwoordelijke + handtekening + datum

naam van de school

CACHET DE L'ETABLISSEMENT / STEMPEL VAN DE SCHOOL

Please indicate in the sections below subjects, hours per week and final results concerning the last three years accomplished by the student. If you have changed schools during the last three years, please identify the school and appropriate year level.

Subject	Academic Year:			Academic Year:			Academic Year:		
	Hours/ week	Grade		Hours/ week	Grade		Hours/ week	Grade	
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									

School Name: _____

School Address: _____

school official's last name, first name, date + signature _____

principal's name _____

OFFICIAL SCHOOL STAMP HERE

Please include info about the grading system used at your school (eg A-E, 1-10 etc)

A l'attention du professeur

Chers Madame, Monsieur,

L'étudiant(e) qui vient de vous remettre le formulaire ci-joint a posé sa candidature à notre programme d'une année ou un semestre académique à l'étranger. La participation de cet(te) étudiant(e) dépend bien sûr de l'acceptation de son dossier par une école dans le pays d'accueil choisi.

Les directeurs d'écoles, dans chaque pays où nous proposons un programme académique, vont interpréter vos commentaires, en fonction d'une sensibilité propre à leurs cultures (qui peuvent être très différentes de la nôtre).

Dans beaucoup de cultures, la personne doit être valorisée au plus haut point, parfois au détriment de l'objectivité, alors qu'en Belgique une certaine humilité est généralement de mise. Ce sont malheureusement des différences culturelles que nous devons assumer dans notre mission et nous devons nous efforcer de préserver les chances de le/la candidat(e) d'accomplir son projet éducatif.

Nous vous invitons donc à insister sur les qualités, les forces et les cotés positifs du/de la candidat(e).

Si vous avez des questions n'hésitez pas à nous contacter au 02/534 53 50. Nous vous remercions d'avance de votre coopération.

Remarque Importante

L'étudiant(e) dispose de 15 jours pour compléter son dossier de candidature. Nous vous serions dès lors très reconnaissants de bien vouloir remettre au/à le/la candidat(e) le formulaire joint, dûment complété dès que possible.

Le professeur qui complète la 'language teacher's recommendation' doit être différent de celui qui complète la 'teacher's recommendation'.

Ter attentie van de leraar

Geachte Mevrouw, Mijnheer,

De student(e) die U het formulier hierbijgevoegd heeft overhandigd heeft haar (zijn) kandidatuur gesteld voor een schooljaar of een semester in het buitenland. De deelneming van deze student(e) hangt uiteraard af van de aanvaarding door de school in het gastland.

De schooloversten in elk land waar wij dergelijk programma aanbieden zullen Uw commentaar lezen in functie van een evaluatiesysteem eigen aan hun cultuur en geaardheid (die tenslotte erg kunnen verschillen van de onze).

In sommige landen liggen de maatstaven bij een evaluatie veel lager dan in België. Waar wij bij een evaluatie een zekere terughoudendheid en nederigheid aan de dag leggen, worden in andere culturen veel meer de positieve kanten van de persoon in de verf gezet zonder gewag te maken van beperkingen.

Deze culturele verschillen moeten wij uiteraard inschatten op hun juiste waarde en onze kandidaten niet de kans ontnemen deel te nemen aan dit educatief project door een al te strenge evaluatie.

Wij vragen U dus vooral de kwaliteiten, de sterke en positieve kanten van de kandidaat te benadrukken.

Indien U vragen hebt, aarzel dan niet ons te kontakteren op nr 02/534 53 36. Wij danken U hartelijk voor Uw medewerking.

Belangrijke Opmerking

De student heeft 14 dagen om zijn dossier in te vullen. Wij zouden U dus heel erg dankbaar zijn mocht U het bijgevoegd formulier, ingevuld, zo vlug mogelijk aan de student willen terugbezorgen.

De leraar die het formulier 'language teacher' invult mag niet dezelfde leraar zijn als deze die de 'teacher recommendation' invult.

This form must be completed by a teacher of one of the student's major subjects at school. If applying for the USA, please submit two 'Teacher Rec' forms and one must be from your English teacher. The *Teacher Recommendation* and *Language Teacher Recommendation* forms must be completed by different teachers.

Please mark the appropriate boxes below:

Character	Excellent	Good	Average
MATURITY			
RESPONSIBILITY TO SELF			
RESPONSIBILITY TO OTHERS			
HONESTY			
OPENNESS			
SENSE OF HUMOUR			
CREATIVITY			
PERSONAL MOTIVATION			
ACADEMIC MOTIVATION			
ABILITY TO INTERACT			
OVERALL CHARACTER			

In the space below please give written comments on the applicant's motivation, attendance record and study habits.

I certify that this report is true to the best of my knowledge.

teacher's last name, first name, position in school, date + signature

teacher's email address

subject(s) taught

Do you wish to receive any documentation about our program?

Yes

If your answer is 'YES' our documentation will be sent to you at the school address unless you specify a different address:

No

I already have information about your program

A l'attention du professeur

Chers Madame, Monsieur,

L'étudiant(e) qui vient de vous remettre le formulaire ci-joint a posé sa candidature à notre programme d'une année ou un semestre académique à l'étranger. La participation de cet(te) étudiant(e) dépend bien sûr de l'acceptation de son dossier par une école dans le pays d'accueil choisi.

Les directeurs d'écoles, dans chaque pays où nous proposons un programme académique, vont interpréter vos commentaires, en fonction d'une sensibilité propre à leurs cultures (qui peuvent être très différentes de la nôtre).

Dans beaucoup de cultures, la personne doit être valorisée au plus haut point, parfois au détriment de l'objectivité, alors qu'en Belgique une certaine humilité est généralement de mise. Ce sont malheureusement des différences culturelles que nous devons assumer dans notre mission et nous devons nous efforcer de préserver les chances de le/la candidat(e) d'accomplir son projet éducatif.

Nous vous invitons donc à insister sur les qualités, les forces et les cotés positifs du/de la candidat(e).

Si vous avez des questions n'hésitez pas à nous contacter au 02/534 53 50. Nous vous remercions d'avance de votre coopération.

Remarque Importante

L'étudiant(e) dispose de 15 jours pour compléter son dossier de candidature. Nous vous serions dès lors très reconnaissants de bien vouloir remettre au/à le/la candidat(e) le formulaire joint, dûment complété dès que possible.

Le professeur qui complète la 'language teacher's recommendation' doit être différent de celui qui complète la 'teacher's recommendation'.

Ter attentie van de leraar

Geachte Mevrouw, Mijnheer,

De student(e) die U het formulier hierbijgevoegd heeft overhandigd heeft haar (zijn) kandidatuur gesteld voor een schooljaar of een semester in het buitenland. De deelneming van deze student(e) hangt uiteraard af van de aanvaarding door de school in het gastland.

De schooloversten in elk land waar wij dergelijk programma aanbieden zullen Uw kommentaar lezen in functie van een evaluatiesysteem eigen aan hun cultuur en geaardheid (die tenslotte erg kunnen verschillen van de onze).

In sommige landen liggen de maatstaven bij een evaluatie veel lager dan in België. Waar wij bij een evaluatie een zekere terughoudendheid en nederigheid aan de dag leggen, worden in andere culturen veel meer de positieve kanten van de persoon in de verf gezet zonder gewag te maken van beperkingen.

Deze culturele verschillen moeten wij uiteraard inschatten op hun juiste waarde en onze kandidaten niet de kans ontnemen deel te nemen aan dit edukatief project door een al te strenge evaluatie.

Wij vragen U dus vooral de kwaliteiten, de sterke en positieve kanten van de kandidaat te benadrukken.

Indien U vragen hebt, aarzel dan niet ons te kontakteren op nr 02/534 53 36. Wij danken U hartelijk voor Uw medewerking.

Belangrijke Opmerking

De student heeft 14 dagen om zijn dossier in te vullen. Wij zouden U dus heel erg dankbaar zijn mocht U het bijgevoegd formulier, ingevuld, zo vlug mogelijk aan de student willen terugbezorgen.

De leraar die het formulier 'language teacher' invult mag niet dezelfde leraar zijn als deze die de 'teacher recommendation' invult.

This form must be completed by your language teacher (host country language).

Note: This form is not necessary if the language spoken in your chosen host country is the same as in your home country.

Please mark the appropriate boxes below:

Language Proficiency	Excellent	Good	Average
READING			
WRITING			
SPEAKING			
COMPREHENSION			

In the space below please give written comments on the applicant's motivation, attendance record and study habits.

Please provide an English translation.

School Name:

Teacher's phone number (for reference check only):

School Address:

I certify that this report is true to the best of my knowledge.

teacher's last name, first name, date + signature

teacher's email address

Do you wish to receive any documentation about our program?

Yes

If your answer is 'YES' our documentation will be sent to you at the school address unless you specify a different address:

No

I already have information about your program

A l'attention du médecin traitant

Nous tenons à attirer votre attention sur les formulaires à compléter:

Physician Statement of Health (Part One)

A chaque fois que vous cochez l'un des éléments repris dans ce formulaire, nous vous demandons de fournir une explication vulgarisée mais cependant détaillée de chaque affection (en Anglais de préférence).

Si l'étudiant(e) souffre d'une affection quelconque, veuillez mentionner le traitement qui doit être suivi ainsi que les précautions à prendre dans l'intérêt de l'étudiant(e). Si l'étudiant a souffert d'une des affections reprises dans le formulaire mais que la maladie est terminée, veuillez préciser depuis quand le traitement est terminé.

Physician Statement of Health (Part Two)

Il est impératif de fournir tous les renseignements demandés.

Immunisation Record

- Pour la DIPHTERIE et le TETANOS 4 doses minimum et un rappel tous les 10 ans sont obligatoires (même si ce n'est pas le cas en Belgique). Cela est en effet exigé par les plupart des écoles étrangères et sans ceux-ci, le dossier du candidat est immédiatement rejeté par les écoles.
- Pour la Polio, un minimum de 3 doses et un rappel tous les 10 ans sont obligatoires (même si ce n'est pas le cas en Belgique). Cela est en effet exigé par les plupart des écoles étrangères et sans ceux-ci, le dossier du candidat est immédiatement rejeté par les écoles.
- Il faut impérativement 2 dates de vaccin pour la ROUGEOLE, la RUBEOLE et les OREILLONS (même si ce n'est pas obligatoire en Belgique), ainsi que 3 dates de vaccin pour l'HÉPATITE B.
- Le candidat doit obligatoirement fournir les résultat d'un test TUBERCULINIQUE (introdermo ou radiographie). Ce test doit être fait endéans l'année qui précède le jour de départ du candidat pour l'étranger.

Ter attentie van de behandelende geneesheer

Wij zouden Uw aandacht willen vragen bij het invullen van de formulieren:

Physician Statement of Health (Part One)

Elke keer u één van de antwoorden aankruist, vragen wij u een kleine maar gedetailleerde en ge vulgariseerde uitleg te geven van elke aandoening (bij voorkeur in het Engels).

Indien de student(e) lijdt aan één of andere aandoening, wilt u dan a.u.b. aanduiden welke behandeling moet gevolgd worden en welke voorzorgen moeten genomen worden in het belang van de student(e).

Indien de student(e) een ziekte heeft doorgemaakt vermeld in het dossier, maar deze ziekte is voorbij, gelieve dan te vermelden dat de behandeling is stopgezet.

Physician Statement of Health (Part Two)

Het is echt belangrijk alle gegevens in te vullen.

Immunisation Record

- Voor TETANOS en DIPHTERIA zijn minimum 4 dosissen en een rappel om de tien jaar verplicht (zelfs indien dit niet het geval is in België) Dit wordt immers door de meeste scholen gevraagd en indien dit niet is gebeurd wordt het dossier (en de student) door de school geweigerd.
- Voor POLIO zijn minimum 3 dosissen en een rappel om de tien jaar verplicht (zelfs indien dit niet het geval is in België) Dit wordt immers door de meeste scholen gevraagd en indien dit niet is gebeurd wordt het dossier (en de student) door de school geweigerd.
- Er moeten zeker twee data vermeld zijn van vaccinaties voor RODE HOND, DE BOF EN MAZELEN en drie vaccinaties voor HEPATITIS B.
- De uitslag van een TUBERCULINETEST niet ouder dan 1 jaar op datum van vertrek van de student, is verplicht.

Does the candidate have or have ever had any of the following illnesses or symptoms?

If yes, please mark appropriate circles and give a clear and legible explanation in the space below. (Use additional sheet if needed.)

- | | | |
|---|--|---|
| <input type="checkbox"/> Chicken Pox | <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Drugs sensitivity (eg penicillin...) |
| <input type="checkbox"/> Rubella | <input type="checkbox"/> Migraine (with aura, nausea and vomiting) | <input type="checkbox"/> Urticaria |
| <input type="checkbox"/> Mumps | <input type="checkbox"/> Hepatitis (if yes, which one:) | <input type="checkbox"/> Asthma |
| <input type="checkbox"/> Malaria | <input type="checkbox"/> Tuberculosis | <input type="checkbox"/> Contact dermatitis |
| <input type="checkbox"/> Parasites | <input type="checkbox"/> Appendicitis | <input type="checkbox"/> Meningitis |
| <input type="checkbox"/> Angina | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Enuresis |
| | | <input type="checkbox"/> Learning or speech defect |
| <input type="checkbox"/> Other (please list)..... | | |

Does the candidate have any allergic reactions to the following?

- Dust Pollen Grass/plants Mould Cigarette smoke Insect venom Other:
- Animals (please specify)
- Foods (please specify)
- Food Additives (please specify)

Can any of the above reactions be life threatening? <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)	Does the candidate have any food intolerances? <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)
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Does the candidate have or have ever had any impairment to the following?

If yes, please mark appropriate circles and give a clear and legible explanation in the space below. (Use additional sheet if needed.)

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Heart, blood, vessels (high blood pressure...) | <input type="checkbox"/> Endocrine system | <input type="checkbox"/> Eyes or vision | <input type="checkbox"/> Skin (acne) |
| <input type="checkbox"/> Lungs, respiratory system | <input type="checkbox"/> Bones, joints, locomotor system | <input type="checkbox"/> Emotional disorder | <input type="checkbox"/> Nose, throat (tonsils...) |
| <input type="checkbox"/> Esophagus, stomach, intestines, liver | <input type="checkbox"/> Brain, nervous system | <input type="checkbox"/> Behavioural problem | <input type="checkbox"/> Ears or hearing |
| <input type="checkbox"/> Kidneys, genito-urinary system | <input type="checkbox"/> Eating disorder (anorexia, bulimia...) | <input type="checkbox"/> Hematopoietic system, spleen | |
| <input type="checkbox"/> Other (please list)..... | | | |

Will the student be using drugs or medication while abroad? (Use additional sheet if needed.) <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)
Has student ever been hospitalised? (Use additional sheet if needed.) <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)
Has student ever consulted a medical <i>specialist</i> ? (Use additional sheet if needed.) <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)

I, the undersigned, have given a thorough physical examination and reviewed the medical history of the above named candidate. I certify that all important medical information has been included, and that the above information is complete and accurate. I certify that the above named student is emotionally and physically fit to engage in a secondary school program abroad.

PHYSICIAN'S STAMP HERE

physician's last name, first name, date + signature
 PHYSICIAN MUST NOT BE A DIRECT FAMILY MEMBER

Please provide information for the following:

HEIGHT:	m	x	3.28 =	'	=	'	"
NOTE: 3.28 feet = 1 metre							
WEIGHT:	kg	x	2.2 =	lb =	st	lb	
NOTE: 2.2 lb = 1 kg							
BLOOD PRESSURE:	mm Hg						
BLOOD GROUP (IF KNOWN) Rh Factor:.....						
URINE	Sediment:..... Glucose:..... (0, +, ++, +++) Proteins:..... (0, +, ++, +++)						
VISION (with correction if necessary)	Right eye:		/10	Left eye:		/10	

If the student wears glasses or contact lenses, please complete the following Ophthalmic information:

	Right Eye			Left Eye		
	AXIS.	SPH.	CYL.	AXIS.	SPH.	CYL.
Distant Vision						
Near Vision						

Glasses
 Contact lenses

Please answer 'yes' or 'no' to the following. Please provide a clear and legible explanation or list when requested.

Are pupillary and knee reflexes normal? (Use additional sheet if needed.) <input type="checkbox"/> Yes <input type="checkbox"/> No (please explain)
Does the student have any scars or identifying marks? (Use additional sheet if needed.) <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)
Are there any restrictions on the student's participation in sports activities or physical education? (Use additional sheet if needed.) <input type="checkbox"/> No <input type="checkbox"/> Yes (please explain)

DESCRIBE IN DETAIL EACH DISEASE, IMPAIRMENT OR ABNORMALITY NOT FULLY EXPLAINED IN THESE FORMS (PARTS ONE AND TWO) ON A SEPARATE SHEET OF PAPER (SIGNED AND STAMPED).

Please give your opinion of the candidate's health: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor
--

I, the undersigned, have given a thorough physical examination and reviewed the medical history of the above named candidate. I certify that all important medical information has been included, and that the above information is complete and accurate. I certify that the above named student is emotionally and physically fit to engage in a secondary school program abroad.

PHYSICIAN'S STAMP HERE

physician's last name, first name, date + signature
 PHYSICIAN MUST NOT BE A DIRECT FAMILY MEMBER

To be completed by the attending physician. Vaccination requirements may vary from one country to another. Unless otherwise instructed, please provide all dates requested. This will determine the student's acceptance into the host country school. Due to change in district or school regulations in the host country, participants may be required to provide additional immunisations before departure or after arrival.

VACCINES	Date of 1st dose given	Date of 2nd dose given	Date of 3rd dose given	Date of 4th dose given	Date of 5th dose given
DTP OR DT¹	/ /	/ /	/ /	/ /	/ /
POLIO²	/ /	/ /	/ /	/ /	/ /
MEASLES	/ /	/ /	• If no immunisation, give date student had measles:		/ /
RUBELLA	/ /	/ /	• If no immunisation, give date student had rubella:		/ /
MUMPS	/ /	/ /	• If no immunisation, give date student had mumps:		/ /
VARICELLA	/ /		• If no immunisation, give date student had chickenpox:		/ /
	• Varicella vaccination (Required if student has not had chicken pox) <input type="checkbox"/> Yes <input type="checkbox"/> No Date of vaccination:				/ /
HEPATITIS B³	/ /	/ /	/ /		
TUBERCULIN SKIN TEST (Mantoux)⁴	<input type="checkbox"/> + Positive <input type="checkbox"/> - Negative		Date of TB Mantoux test:		/ /
	• If TB skin test positive, report of negative chest X-ray required. Chest X-ray result: <input type="checkbox"/> + Positive <input type="checkbox"/> - Negative				Date of X-ray: / /

1 Diphtheria, Tetanus and Pertussis (DTP) and/or Diphtheria and Tetanus (DT): Four or more doses of DTP or DT (or combination), including a booster administered within 10 years from end date of WEP program.
 2 Polio, 3 or more doses of polio vaccine. An additional dose is required if last dose was received before the age of 4 years.
 3 Hepatitis B: Countries, except USA, accept the two dose or three dose schedules. For the USA, students must have received three doses of Hep B vaccine.
 4 TB skin test must have been administered within last six months. Required for Argentina, Canada, Italy and USA.

Comments:

I, the undersigned, have given a thorough physical examination and reviewed the medical history of the above named candidate. I certify that all important medical information has been included, and that the above information is complete and accurate. I certify that the above named student is emotionally and physically fit to engage in a secondary school program abroad.

PHYSICIAN'S STAMP HERE

physician's last name, first name, date + signature
 PHYSICIAN MUST NOT BE A DIRECT FAMILY MEMBER

The term «placing organisation» used hereunder refers to the sponsor organisation that will organise placement and supervise the student in the host country. This can be an organisation member of the WEP network or any other agency cooperating with your «WEP sending organisation». The term «WEP sending organisation» refers to the sending organisation that has recruited the participant. The term «WEP» refers to both the «placing organisation» and «WEP sending organisation». The name and contact details of the «placing organisation» will be given to you, prior to departure.

1. Privacy policy

Information provided by you to WEP in any application is subject to Privacy Laws. WEP respects your privacy and is committed to maintaining the privacy of your personal information. For more details contact your WEP sending organisation.

2. Inclusions in and exclusions from the program

2.1 Inclusions

1. Thorough assessment by WEP of student's application
2. Placement with a family in the host country by «placing organisation»
3. Enrolment in a secondary educational institution by «placing organisation»
4. Visa documentation (if necessary)
5. Private travel insurance (with the exception of Australia where student must be covered by the mandatory Overseas Student Health Cover, OSHC).
It is the student and their parents' responsibility to assess this policy to ensure it satisfies the student's requirements. Should further insurance be required, it will be at the student's (and their parents') own expense.
6. Welcome arrival in host country (either by local representative or hosts)
7. Post arrival orientation
8. Support and assistance of «placing organisation» in the host country
9. Emergency support in host country 24 hours a day, 7 days a week
10. Periodic reports from WEP placing organisation.

2.2 Exclusions

1. Passport and visa fees
2. Personal items and expenses including but not limited to toiletries, phone calls, postage, social activities, entertainment, restaurant and other meals away from the host family's home
3. School excursions and trips not covered by the program fee
4. Hire/purchase of school books (if not provided) and materials, uniform (if required), as well as subject levies
5. Transport to and from school if not provided free of charge by school
6. For some destinations, transport to/from host country (please refer to the brochure of the WEP sending organisation)
7. Intensive language classes if required by the school or the «placing organisation» in case the student cannot communicate at a sufficient level in the host country.

3. Student finance

Exchange students provide all their own spending money. We advise around US\$/EUR 180 to 250 or AU\$350+ in local currency each month to cover personal expenses such as phone calls, leisure, movies, personal hygiene items, letters, photocopies, etc and varies according to destination. School costs, optional excursions, clothing and unfavourable foreign exchange rates can increase the monthly expenditure.

4. Passport and visa

Students who do not have a valid passport should apply for one as soon as possible as in some countries it can take several months to be issued. Whether your passport is old or new, please ensure that you have a validity of six months minimum on return to your home country.

Most programs require a visa based on documentation supplied by «placing organisation». Your WEP sending organisation will keep you informed of the visa application procedure.

5. Alterations to program

WEP reserves the right to modify, alter and limit any aspects of the program as it deems necessary to ensure its proper conduct and to comply with visa regulations/changes.

6. Expulsion from program, voluntary withdrawal, termination or cancellation of program

«Placing organisation» reserves the right to expel students from the program at any time if it considers, at its absolute discretion, that a student has breached the program rules. In this case students will be returned to their home country at their parents'/guardian's expense.

WEP reserves the right to cancel any program or decline to accept or retain any student at any time. Should a program be cancelled by WEP prior to departure, a full refund of all monies paid will be made.

Should student withdraw voluntarily from program before end date, natural parents must accept all responsibility and bear all return costs.

7. Relationship between WEP and program service providers

WEP, its subsidiaries and representatives do not act as agents for the various companies, owners or providers of other services. The student and the student's parents/guardian acknowledge that WEP, its subsidiaries, and representatives are not liable for any loss, delay, injury, damage or irregularity resulting from a defect in any vehicle, or caused by any company or person, including but not limited to, owners or operators of transportation, insurers and suppliers of accommodation.

WEP reserves the right to engage, at WEP's own discretion, the services of any IATA airline members, on either a scheduled or chartered basis.

The student is bound by a separate contract with the Airlines. The Airlines will not be liable for any act, omission or loss suffered by the students outside their flight.

8. Relationship between student and WEP

This agreement does not constitute the student, their parents/guardian as agents of, or as partners with the «placing organisation» for any purpose whatsoever. The student, their parents/ guardians must not pledge the credit of the «placing organisation» to any third party at all.

9. Application of law

All aspects of this agreement are governed by the law of the state, district, region or province where the «WEP sending organisation» is based. The parties select the courts of that state, district, region or province as the forum for settlement of any dispute that arises under this agreement.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

STATEMENT OF GUARDIANSHIP

We grant WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live, at their decision, and if needed, at the cost of the student or his/her parents or legal guardians (in the case of expenses not covered by student's insurance) the power to place the student in a hospital or in any other institution for any type of assistance or medical treatment or, if there is no appropriate institution available, to place the student under the care of a local medical doctor for his/her treatment.

We grant WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live, all necessary permissions to act 'in loco parentis' at the cost of the student, parents or legal guardians in any situation, especially in emergencies whether medical or other including the possibility of permission for surgical operations or any other treatment deemed necessary. We authorise WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live to return the student to the country of origin at the cost of the student, parents or legal guardians, if necessary, to submit to medical treatment, if this is deemed necessary by the above mentioned people, after consultation with medical authorities. We confirm that at the time of signing this document the student enjoys good health, that his/her medical records included in the student application are true and complete, and that the student is fit to engage in any physical and sporting activity.

We grant WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live, permission to act on our behalf in anything pertaining to possible representation before the local authorities. This authorisation shall be valid for the complete duration of the program in which the student is participating.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

DRIVER'S EDUCATION AGREEMENT & RELEASE (FOR OUTBOUND PROGRAM TO USA ONLY)

The undersigned parent(s) or legal guardian(s) of

acknowledge(s) the following: The American Sponsor Organisation stated hereunder allows my son/daughter to participate in a driver's education course which involves behind the wheel driving. S/he may take driver's training under the following conditions:

1. The host family car may not be used for practice, class work or for the driver's test.
2. A car may not be rented for use by my son/daughter.
3. A friend's car may not be used by my son/daughter.
4. My son/daughter may enroll in a private driving school for the purpose of obtaining his/her driver's licence.

I/we understand that I/we will be solely responsible for the cost of the private driving school instruction and for all procedures which may result (which may differ from one state/district to another).

5. My son/daughter may use the driving school vehicle to take the drivers test.
6. If my/our son/daughter receives a driver's licence, I/we understand that the licence must be turned over to the American Sponsor Organisation's Program Coordinator until the end of the program. The American Sponsor Organisation stated hereunder DOES NOT ALLOW ANY STUDENT TO DRIVE WHILE PARTICIPATING IN THE ACADEMIC PROGRAM.
7. I acknowledge that my child's standard medical insurance policy does not cover any medical costs that may be incurred as a result of an automobile accident which occurs while my child is behind the wheel. I understand that I am solely responsible for such medical costs.

I am/We are the parent(s) or legal guardian(s) of the above named student. I/We have read the foregoing agreement and release, and agree to be bound by it.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

MEDICAL RELEASE

We as Parents of the Undersigned Student, do hereby authorise WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live as agents of the undersigned parents to consent to any X-ray examinations, anaesthetic, medical or surgical diagnosis or treatment or hospital care which is deemed advisable by and is rendered under the general supervision of any licenced physician or surgeon, whether such treatment or diagnosis is rendered at the clinic of said physician or surgeon or at a hospital. It is understood that this authorisation is not given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power on the part of our aforesaid agents to give specific consent to any and all such diagnoses, treatments or hospital care which the aforementioned physician or surgeon in the exercise of his best judgement may deem advisable. This authorisation shall be valid for the entire duration of the program in which the student is participating. Student agrees with the above conditions even if 18 years of age or more before/or during the program.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

TRAVEL AUTHORISATION FORM

We as Parents of the Undersigned Student, do hereby authorise WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live as agents of the undersigned parents to make the determination for Student travel for the duration of Student's participation in the Secondary School Program. It is understood that this Authorisation is given in advance only when the Student is travelling and supervised by a Host parent or by a Representative of a school program, or any Tour Operator approved by the placing organisation stated hereunder. We understand that the student may not travel unsupervised. Student agrees with the above conditions even if 18 years of age or more before or during the program.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

PROGRAM DURATION

We as Parents of the Undersigned Student, understand that the program duration is dependent on school term/semester dates and the directive of the placing organisation, and specific program length cannot be guaranteed. We also understand that the Secondary School Program terminates one week following the closure of the student's program at school. WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live, will not be held responsible for the student after this termination date. Students must leave the country within seven (7) days, unless they travel with their natural parents, or change their visa status. Student agrees with the above conditions even if 18 years of age or more before or during the program.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

LIABILITY

We as Parents of the Undersigned Student do hereby authorise the Undersigned Student, without any responsibility WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live, to participate in any sports except sports stated in section 'program rules'. We understand that the student may not be able to graduate or obtain a diploma, this is subject to Federal, State, Community and/or School regulations. We also understand that acceptance of the Undersigned Student in a sport team of the school and/or the community is subject to Federal, State, Community and/or School regulations. We, as parents of the Undersigned Student and the Undersigned Student, have read the rules of the program and agree to abide by them. We agree that WEP, the sending and/or the placing organisation, its employees, coordinators, the educational institution where the student is assigned, and the family or families with whom the student may live cannot be held responsible if any incident, resulting from failure to follow program's rules or advice by the Undersigned Student, occurs. All the material provided for the purpose of the program (application form, student handbook, profile, interview report, etc...) and photographs and other documentation supplied by the student while on or returned from program...remain the property of WEP, the Sending and/or Placing Organisation. WEP, the Sending and/or Placing Organisation and/or their employees and agents may use pictures or any media support, in which student and/or parents appear, for promotional purpose through any media or any other promotional support available. Student agrees with the above conditions even if 18 years of age or more before/or during the program.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

name of sponsor (placing) organisation —
to be completed by organisation manager

PROGRAM RULES

Below are the rules of the Sponsor Organisation and WEP. These rules concern all students participating in the program. Please read carefully and sign your name after you fully understand and agree to comply with these rules.

- Students must abide by the laws of the host country and native country.
- Students must only use drugs prescribed by the doctor. (This includes all hallucinogenic drugs.)
- Students are not permitted to purchase or drink alcoholic beverages.
- Students are not permitted to purchase or shoot guns of any type.
- Students are not permitted to drive any motorised vehicle. Students are allowed to take driver's education and obtain a driver's licence (outbound program to the USA only). Students are not allowed to use host family or friend's car in order to obtain a driver's licence. Students should only use a car provided by school or driving school. Once a driver's licence has been obtained, it should be retained by the coordinator.
- Due to his/her role as an 'ambassador' of his/her home country, exchange student must not participate in any sexual contact or sexual activity that is culturally inappropriate in host country. In most countries, sexual activities among teenagers or young adults are considered as a breach of moral standards. Students who are of legal age must not participate in any sexual contact or sexual activity with a person who is under legal age.
- Students must maintain school attendance and enrolment. School expulsion results in program termination.

ANY INFRACTION OF THE ABOVE RULES WILL RESULT IN IMMEDIATE DISMISSAL FROM THE PROGRAM AND WILL RESULT IN TERMINATION OF STUDENT'S VISA.

- Students should refrain from smoking if this is not culturally accepted in host country.
- Students must always be aware of their responsibility as exchange students and make a determined effort in their school, host family and host community.
- Students must attend school daily, including during exam time, maintain a 'C' grade average and attempt all tests, assignments and exams that are part of the standard curriculum in the host country. This rule must be followed despite any advice to the contrary received in the host country.
- Students are not permitted to visit such places as pornographic shops, adult theatres or drinking establishments.
- Students are not permitted to visit websites, chat sites, internet forums with adult content.
- Students are not permitted to participate in parachute jumping, bungee jumping, caving or any other dangerous activities.
- Students must show respect for their families and act as a member of the family.
- Students must obey family rules.
- Students must voluntarily help with household chores.
- Students are not permitted to talk about the family's private affairs to others (except with their coordinator or sponsor organisation).
- Students cannot change families and schools at will.
- Students are not permitted to travel independently by air, on land or sea during the program. All travel must be supervised by an adult (over 25) and approved in writing by the host family, natural family and WEP, well in advance of the planned travel.

- Students must show respect for their coordinators and obey their instructions.
- Students must not get any part of their body tattooed or pierced while on program.

ANY FAILURE TO ABIDE BY THE ABOVE RULES MAY RESULT IN DISMISSAL FROM THE PROGRAM AND TERMINATION OF STUDENT'S VISA.

- Students should limit contacts with other exchange students during the program and make all necessary efforts to have contacts with host country citizens.
- On special occasions (Christmas, birthdays...) Student's priority must be to spend this time with the host family.
- Student is responsible for bringing with him official transcripts of his most recent grades.
- Students should limit phone calls & sms, email messages to parents or friends and pay for calls or internet connection.
- Parents and friends may not visit the student during the program and may not disturb the host family life.
- Students may not enter into any contractual agreement, be it business, marital or religious.

STUDENT AND PARENTS UNDERSTAND THAT NOT FOLLOWING THE ABOVE RULES MAY HAVE NEGATIVE EFFECTS ON STUDENT'S INTEGRATION IN THE HOST COUNTRY, COMMUNITY, SCHOOL OR HOST FAMILY.

STUDENT AND PARENTS UNDERSTAND THAT NOT FOLLOWING THE PROGRAM RULES MAY AFFECT THE SUCCESS OF STUDENT'S HOMESTAY AND/OR MAY HAVE NEGATIVE CONSEQUENCES ON STUDENT'S FUTURE.

STUDENT ALSO AGREES TO THE ABOVE RULES EVEN IF 18 YEARS OF AGE OR OLDER BEFORE/OR DURING THE PROGRAM.

VERY IMPORTANT

Immediate dismissal and return of the participant will be organised : if participant and/or legal guardians have provided false information in the application form or in any other document related to the WEP program. If participant and/or legal guardians have not notified WEP of any change related to physical, mental or emotional state of the participant prior to his departure for the host country. High School exchange is a very challenging program and it is essential for the student to be physically and mentally fit to succeed in the program. If participant shows any sign of emotional disorder, eating disorder, depression, nervous breakdown. If participant displays violent behaviour towards any person or animal. If participant makes comments or behave in a way that may lead to think he/she could represent a danger to him/herself or to other people. It is essential that participant, parents and/or legal guardians understand that if a participant shows any signs as indicated above, this might be an indication of a deep and serious issue that will have to be treated or dealt with in the home country.

name + student's signature + date + 'read and approved'

name + parents' signatures + date + 'read and approved'

PROGRAM CONCEPT

The exchange student lives with a volunteer host family as a family member, while attending a local secondary school for the duration of the visit.

PROGRAM PURPOSE

To learn about host country culture by actively participating in family, school and community life. To help students improve their written and oral knowledge of the host country language. This results in better understanding and tolerance among people throughout the world.

EXPECTATIONS

Adapting to a new family, school, friends, language and culture is very challenging, and often difficult, but always rewarding, with benefits for the student's lifetime.

IMPORTANT ASPECTS OF THE HOST COUNTRY, LIFE & CULTURE

The socio-economic standing of families varies greatly, and may be very different from that of the student. Hosts live in various areas and regions and are likely to live in suburbs, small towns, villages, rural or semi-rural locations. Placement in urban or suburban areas is not guaranteed in any way.

Host families come in all shapes and sizes. They represent a complete cross-section of each host community and the richness of family diversity in today's world. Families can be 'nuclear' (mum, dad plus children), 'empty-nesters' (older couples or singles who now have grown children), couples (de facto or married) of any age with or without children, blended families, same-sex couples with children, single parents with children, single adults and more. Most importantly, families are volunteers, eager to host students and are carefully interviewed and screened to ensure they are an appropriate host family.

Most host parents supervise the activities of their children, some quite firmly. Teenagers usually ask permission to go places, go only where they have been permitted to go and must return by the agreed hour, or phone if they will be late because of emergency.

The rules for all activities away from the family, especially evening activities, will be set by the host parents and must be honoured by the student.

Host parents expect their children to share the burden of household tasks. All students are to accept their share of this work as a member of the family. Smoking is becoming more of an unacceptable behaviour in most countries. Purchase of cigarettes by students under 18 is illegal in many countries. Placement can be difficult (or impossible in some countries) for students who smoke. Students may not smoke in the host country if this is not culturally accepted. Students may not drink, buy or possess alcohol.

YOU SHOULD ALSO KNOW THAT

Host families are (unless stated otherwise) non-paid volunteers who have offered to take you into their family as a member, not as a guest. Their offer to you, the student, is from the heart. Students normally have one family for the duration of the program. However, conditions and circumstances within the host family may change, requiring a host family change, as determined solely by the placing organisation.

Student's graduation from a secondary school in the host country is rarely possible. This varies from school to school, district to district and state to state. WEP and the placing organisation have no power in such matters. This is determined solely by the school. Student's year level will be determined by the school and school reports cannot be guaranteed.

Exchange students provide all their own spending money. We advise around US\$/EUR 180 to \$250 or AU\$ 350+ in local currency each month to cover personal expenses such as phone calls, leisure, movies, personal hygiene items, letters, school books, photocopies, etc...

Student placement is at the discretion of the placing organisation. No guarantees are made as to geographic area, socio-economic level of the host family, size or type of school.

THE KEY TO A HIGHLY SUCCESSFUL EXCHANGE EXPERIENCE

An exchange program makes available to the student an exciting, maturing experience with advantages lasting a lifetime. The greatest benefits are available to those students who treat all others with respect and consideration; are willing to reach out to others for friendship; can adjust to a new family, friends, language and culture; and settle into new school routines among new friends without major disruption. The rewards of the program are great, indeed, for the student who shares with the new family, friends and school.

I, the student, have read these program details.
I understand my part in the student exchange process.

name + student's signature + date + 'read and approved'

As the student's parents/guardians, we have read and understood these program details. We will encourage our child to participate in all aspects of the program.

name + parents' signatures + date + 'read and approved'

name of sponsor (sending) organisation —
to be completed by organisation manager

name of sponsor (placing) organisation —
to be completed by organisation manager