

STUDENT APPLICATION



ProAmerican Educational And Cultural Exchange
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INSTRUCCIONES PARA EL ESTUDIANTE DE CÓMO LLENAR LA APLICACIÓN -

Antes de recibir estas aplicaciones, deberás haber pagado \$_____, completado tu aplicación preliminar y copia del último reporte de la escuela, tomado y pasado el examen de Inglés SLEP, y haber sido entrevistado por un representante de PEACE, revisemos ahora la aplicación principal y veamos cómo completarla. Todas las secciones de este aplicación, necesitan ser llenadas en el idioma Inglés y pgs 1-4 solamente por el estudiante.

Abajo: Marca con una "x" cada sección después de completarla.

1. **PERFIL:** Primero deberás de hacer tu propio perfil. Esta página es como tu aplicación preliminar, pero ahora deberá ser en Inglés. Esto es porque estas pidiendo vivir en un país donde se habla Inglés. Esta gente en los EEUU no hablan tu idioma, así que ahora deberas de hacer todo en el idioma de ellos. Adicional a esto usted debe completar formas del Gobierno de EEUU, 156 y 158. La información falsifi- cada tendrá como resultado penas financieras, una visa negada, y reducirá la oportunidad de visas futuras para visitar los Estados Unidos.

2. **TU PERSONALIDAD:** Un cuestionario que nos indique tu estilo de vida, tus gustos y preferencias, tus rasgos personales, filosofía y creencias, nos ayudará a encontrar una familia anfitriona apropiada y que podrá entenderte mejor. Esto no garantizará que todos los miembros de la familia serán compatibles contigo, ni que tu encontrarás todo lo que deseas. Muchas familias escogen estudiantes cuyos estilos de vida es muy diferente al de ellos. Y recuerda que tu objetivo es aprender acerca de la gente y sus estilos de vida, aun cuando este sea diferente al que estos acostumbrado. Usa las siguientes respuestas en las preguntas de la sección anterior (2) acerca de lo que mas te molesta o te hace sentir extremadamente incómodo. (5) alérgico o extremadamente incómodo (4) molesta alto (3) molesta moderado (2) molesta muy poco (1) no te molesta para nada.

3. **TU ACTVIDADES:** Verifique en la columna izquierda (NOW) todas actividades que usted ha hecho recientemente o hace actualmente y ennegrece la caja sólo para esos usted hace mucho o que te guste la mayoría. Teñir de negro sus favoritas. En la columna derecha (ES) chequea los que te gustaría hacer como un estudiante de cambio y ennegrecer sólo esos te gustaría hacer la mayoría de. Limite las cajas ennegrecidas al primero 25% de todas respuestas en cada columna. Sea honesto y exacto. Describiendo lo que usted piensa le hará más interesado que usted es, obtendrá usted que sea escogido por la familia equivocada. Teñir de negro sus favoritas

4. **TU CARTA PERSONAL:** Debes escribir tu carta sin ayuda. Debe ser una muestra de tu habilidad para escribir además de tu biografía. Revela tus sentimientos hacia tu familia, tus metas, porqué quieres ser un estudiante de intercambio, y porqué crees que serías un buen representante. No duplique las respuestas del cuestionario dado anteriormente. Firma con tu nombre al final de la carta y pon tu nombre y apellido debajo. Tus padres deben escribir una carta de presentación a la familia anfitriona.

5. **SECCION ACADEMICA:** Anexa una copia oficial de notas de tus dos últimos años de escuela, junto con las notas que tengas del año que estás cursando y una traducción en Ingles. Si tu no estás graduado cuando viajes a los EEUU y necesitas tus créditos, el director de tu escu conseguir de seguro diploma o crédito alguno de tu escuela anfitriona. Usted debe traer una copia de su expediente actual del año si usted quiere tener derecho a jugar deporte en la escuela. No todos las escuelas permiten estudiante de intercambio jugar.

6. **SECCION IDIOMA:** Pregunte su maestro de inglés que te de una prueba inglesa en la sección académica y le valora honestamente. Las evaluaciones exageradas pueden tener como resultado que las escuelas Americanas pueden cancelar su matriculación. Si usted no es bueno en el ingle coloquial básico, empiese a tomar lecciones privadas inmediatamente. Su entrevista de la visa se realizará en inglés. Vuelva todo a nosotros sin abrir. Traiga uno actualizado nuevamente cuando usted viajes.

7. **REFERENCIAS DE COMUNIDAD:** Deberás incluir Referencias de adultos o sacerdotes de tu comunidad (vecino) que no estén emparentados contigo. Para las referencias debes proporcionar sobres con una nota o sello que indiquen su "confidencialidad".

8. **SECCION MEDICA:** Si alguna vacuna no se ha subministrado como es requerida en la tabla de la primera página de la sección médica, por favor pide a tu Doctor que la aplique EN EL MOMENTO DE TU EXAMEN. [MMR (sarampión, paperas y rubéola; y Td: tétanos y difteria; Hep B deben ser inyectadas cada 10 años!). No recibirás ningún documento para sacar tu visa o el boleto de tu viaje si los requerimientos médicos no son cumplidos. Las vacunas extras son recomendadas dependiendo de tu destino final. Los gastos por tus exámenes médicos y las vacunas van por tu cuenta. Si usas frenos dentales, adjunta aquí una copia de tu programa dental; además trae contigo uno actualizado cuando viajes.

9. **COMPROBACIONES:** Deberán firmar las dos partes del compromisos de estudiante, de los padres, de la seguridad, del viaje, y del financiero.

10. **TUS 6 FOTOS** de pasaporte (sonriendo) se incluirán para tu aplicación, tu escuela, tu familia anfitriona, tu tarjeta identificación, tu representante Americano, y una extra. También deberás incluir fotos de tu casa, familia, y de tí mismo para que te conozcan mejor. Escribe tu nombre en cada foto para identificación en la oficina del programa en EU. Tambien una copia de la pagina con su foto en su pasaporte.

11. Grabar en Inglés un video (VHS, VHS-C, CD, o DVD) de 10 minutos de su casa, familia, amigos, escuela, actividades, y ciudad para presentaciones en classes de las escuelas, jóvenes de iglesia, o organizaciones de la comunidad.

12. Esta aplicación deberá ser completada y devuelta a PEACE antes de 30 días de esta fecha _____, incluido su video. Hasta que el 50% de tu aplicación sea pagada, no podemos trabajar con tu aplicación en EU.

*Sea individual o en grupo serás citado para una orientación de salida. Esta reunión es **obligatoria** y se revisarán las reglas, expectativas y obligaciones tuyas y de tus padres hacia PEACE. Las Falsas expectaciones tuyas pueden causar problemas a todos; así que tu asistencia es **obligatoria**. Esta reunión se puede tener antes de recibir noticia de una familia de anfitrión.

INCOMING STUDENT APPLICATION INSTRUCTIONS

Before receiving these instructions and the full application, you should have already submitted your 2-page preliminary application, a copy of your last school report card, paid a \$150 non-refundable processing fee, and been interviewed by a program representative.

THE MAIN APPLICATION: The student, not his or her parents or teachers, should complete this as much as possible. Review all before turning in to your representative. Do not leave any answers blank. Check each area off as you complete it.

1. PROFILE SECTION: First, complete the basic, Personal Profile questions on the FRONT page. These are the same questions that you did on the preliminary application except you must now do it in English. This is because you are applying to live in an English-speaking country. The people reading your application there probably don't speak your language; so, you must now do everything in their language. Disclose all relatives (including cousins, aunts, uncles) in the USA. Plus US Government forms 156 and 158. Falsified information will result in financial penalties, a denied visa, and reduce the chance of future visas to visit the USA.

2. ATTITUDE QUESTIONNAIRE: to tell your preferred life-style and to reveal some of your personality traits, philosophy, and beliefs. We cannot guarantee that all of the people you will live with will have a compatible temperament with yours, or that you will get to do or see all that you want, but this will help us better match you with a host family (since the family chooses the student) and for them to better understand you. Use numbers instead of [X] to be more precise in your answers. This is very important describing things you are bothered by (5=allergic, 4=highly bothered, 3=moderate, 2= minor annoyance, 1=Doesn't bother you at all). If allergic tell if you control it and how. Make sure these answers describe you and not what you think we want, or you'll end up in the wrong home.

3. ACTIVITY LIST: Here, check in the first column all activities you have done recently or do currently and blacken the box ONLY for those you do a lot or like the most. In the second column check the ones you'd like to do as an exchange student and blacken ONLY those you'd like to do the most. Confine the blackened boxes to the top 25% of all responses in each column. Be honest and accurate. Describing what you think will make you more interesting than you are will get you selected by the wrong family.

4. PERSONAL INTRODUCTION: Your letter must be written without assistance in English. It is your story, not someone else's. Don't duplicate statistics from the first page. Instead, reveal your relationship with and feelings towards your family. Tell us your life goals, why you want to be an exchange student, and why you think you would be a good one. Don't forget to sign your name. Your parents should write an open letter of introduction to the new host family. You must translate it into English if they can't.

5. ACADEMIC SECTION: You must attach an official transcript of your last two full years, plus available present-year grades. Make an English translation of those courses in this section. If credits are needed because you will not be graduated from high school, your principal must write a letter (with an English translation) requesting the classes you need for credit. If you will have graduated by the time you travel, don't expect to receive a diploma or academic credits from your host school. You must bring a copy of your current year's transcript if you want to be eligible for school sports. Not all schools allow exchange students to play.

6. ENGLISH TEST: Ask your most recent English teacher to give you the English test in the Academic Section and rate you honestly. Exaggerated evaluations may result in American schools canceling your enrollment. If you are not good in basic conversational English, start taking private lessons immediately. Your visa interview will be conducted in English.

7. COMMUNITY REFERENCES must be completed by ADULT neighbors, friends, clergy, or employers unrelated to you. Give them a postage-paid, return envelope with a note for them to seal and mark "confidential". Return all to us unopened.

8. MEDICAL SECTION: If any immunization has not been given or boosted as required on the chart on page one, PLEASE get your doctor to give it AT THE TIME OF YOUR EXAM. (MMR & Td must be boosted every 10 years!) Extra vaccinations may be recommended, depending on your final destination. Expenses for exams and immunizations are your responsibility. If you wear braces, attach a copy of your orthodontic program here; also, bring a newly updated one with you when you travel.

9. CONTRACTS: You and your parents must sign both sides of the Academic, Electronic, Medical, & Travel Issues, and Student-Parental Agreement. Parents must also sign the Payments/Cancellations/Refunds Agreement and the ES App Amendment.

10. SIX ID-SIZE PHOTOS are needed for copies of your application, advertising, and your student I.D. **Be sure to smile or nobody will want you!** (2) Add some color snapshots of your house and your family for us and your new host family to see. Print your name on the back of each photo, to insure that it doesn't get mixed up with someone else's. (3) Photocopy the main page of your passport.

11. VIDEO. Make a 5-7 minute English DVD or .wav file of your house, family, friends, school, activities & city. Bring this to review with your application. It will help the host school evaluate your English and be useful to you for local presentations after you arrive.

12. TIMELINE: This entire application should be completed & returned to your representative within 30 days of this date: _____ Get a passport expiring 6 months later than the program. Attach a photocopy of the main page on your passport. A search for a host family will not begin until 50% of fees are paid. All fees are due before visa document is released or a plane reservation is made.

13. DEPARTURE PREPARATION: Before traveling, you will receive an orientation to review the rules and obligations that you and your parents must follow while participating in the PEACE program. False expectations by you can cause trouble for everyone; therefore your attendance is mandatory. This meeting may be held before notice is received of a host family.

INFORMACION SOBRE EL I-94

Jueves, 17 de Julio de 2008

Un mensaje del "Departamento de Seguridad Nacional de los Estados Unidos" (DHS):

Querido viajero:

Si usted regresó a casa con su forma de registro de salida del Servicio de Inmigración y Naturalización (INS), Forma I-94 (blanca), o la Forma I-94W (verde) en su pasaporte, entonces su salida no fue registrada apropiadamente. Es su responsabilidad corregir esto. Debe proporcionarle a INS(DHS) la información suficiente para que se registre que salió oportunamente de los Estados Unidos. Con esto se cerrará el registro que se abrió a su llegada a este país.

Si usted no verifica que salió oportunamente de los Estados Unidos, o si no puede comprobarlo de manera razonable la próxima vez que solicite admisión a los Estados Unidos, INS puede concluir que usted permaneció en el país más tiempo de lo autorizado. Si esto sucede, la próxima vez que solicite entrar a Estados Unidos su visa puede estar sujeta a cancelación o usted puede ser devuelto de inmediato a su puerto de origen en el extranjero.

En particular, los visitantes que permanezcan en Estados Unidos más allá de lo permitido y que se encuentren bajo el Programa de "Visa Waiver", no podrán reingresar a los Estados Unidos en el futuro sin antes obtener una visa en algún Consulado de los Estados Unidos. Si esto ocurre y usted llega a un puerto de entrada de los Estados Unidos solicitando admisión bajo el programa de Visa Waiver sin una visa, los oficiales de inmigración en Estados Unidos podrían ordenar su retorno inmediato a su puerto de origen en el extranjero.

Para verificar su salida, la oficina de INS(DHS) considerará una gran variedad de información incluyendo – pero sin estar limitada - a:

- Los pases de abordar originales que usted empleó para salir de Estados Unidos.
- Fotocopias de sellos de entrada o salida en su pasaporte mostrando su entrada a otro país después de que usted salió de Estados Unidos (debe de fotocopiar todas las páginas de su pasaporte que no se encuentren completamente en blanco, e incluir la página de su información biográfica con su fotografía); y
- Fotocopias de otro tipo de evidencia tal como:
 - Recibos de nómina o comprobantes de pago de su empresa fechados, para indicar que usted estuvo en otro país después de salir de Estados Unidos.
 - Estados de cuenta bancarios fechados, mostrando transacciones que indiquen que usted estuvo en otro país después de que salió de Estados Unidos.
 - Registros escolares mostrando su asistencia a una escuela fuera de Estados Unidos para indicar que estuvo en otro país después de abandonar Estados Unidos.
 - Recibos de tarjeta de crédito fechados donde se muestre su nombre (pero con el número de tarjeta de crédito tachado), de compras realizadas después de su salida de Estados Unidos, para indicar que estuvo en otro país después de abandonar los Estados Unidos.

Su declaración no se aceptará sin documentos de evidencia tales como los que arriba se mencionan. Envíe por correo copias legibles o, si es posible, documentos originales. Si envía documentos originales conserve una copia. INS no podrá devolver los originales después de haber procesado su reporte. Para ayudarnos a comprender su situación y corregir sus registros rápidamente, por favor incluya una carta de explicación en inglés. Debe de enviar su carta y documentos de evidencia solamente a la siguiente dirección:

**ACS-INS SBU
P.O. Box 7125
London, KY 40742-7125
USA**

No envie su hoja de salida Form I-94/I-94W o documentos de soporte a ningún Consulado de los Estados Unidos o Embajada, tampoco a ninguna otra oficina de INS(DHS) en los Estados Unidos, o a ninguna otra dirección diferente del mencionado arriba. Solamente en la dirección mencionada arriba podremos hacer las correcciones necesarias a los registros de INS para evitarle inconvenientes en el futuro.

(Rev. IN02-39)

I-94 INFORMATION

Thursday, July 17, 2008

A Message from the Department of Homeland Security (DHS):

Dear Traveler:

If you returned home with your Immigration and Naturalization Service (INS) departure record Form I-94 (white) or Form I-94W (green) in your passport, it means that your departure was not recorded properly. It is your responsibility to correct this record. You must provide the Legacy INS (DHS) sufficient information so we can record your timely departure from the United States. This will close out your earlier record of arrival to this country.

If you do not validate a timely departure from the United States, or if you cannot reasonably prove otherwise when you next apply for admission to the United States, the INS may conclude you remained in the United States beyond your authorized stay. If this happens, the next time you apply to enter the United States, your visa may be subject to cancellation or you may be returned immediately to your foreign port of origin. In particular, visitors who remain beyond their permitted stay in the United States under the Visa Waiver Program cannot reenter the United States in the future without obtaining a visa from a United States Consulate. If this occurs and you arrive at a United States port-of-entry seeking admission under the Visa Waiver Program without a visa, United States immigration officers may order your immediate return to a foreign point of origin.

To validate departure, the Legacy INS (DHS) will consider a variety of information, including, but not limited to:

- Original boarding passes you used to depart the United States.
- Photocopies of entry or departure stamps in your passport indicating entry to another country after you departed the United States (you should copy all passport pages that are not completely blank, and include the biographical page containing your photograph); and
- Photocopies of other supporting evidence such as:
 - Dated pay slips or vouchers from your employer to indicate you were in another country after you departed the United States.
 - Dated bank records showing transactions to indicate you were in another country after you left the United States.
 - School records showing attendance at a school outside the United States to indicate you were in another country after you left the United States.
 - Dated credit card receipts, showing your name, but, the credit card number deleted, for purchases made after you left the United States to indicate you were in another country after leaving the United States.

Your statement will not be acceptable without supporting evidence such as noted above. You must mail legible copies or original materials where possible. If you send original materials, you should retain a copy. The INS cannot return original materials after processing. To help us understand the situation and correct your records quickly, please include an explanation letter in English. You must send your letter and enclosed information only to the following address:

**ACS-INS SBU
P.O. Box 7125
London, KY 40742-7125
USA**

Do not mail your departure Form I-94/I-94W or supporting information to any United States Consulate or Embassy, to any other Legacy INS (DHS) office in the United States, or to any address other than the one above. Only at this location are we able to make the necessary corrections to INS records to prevent inconvenience to you in the future.

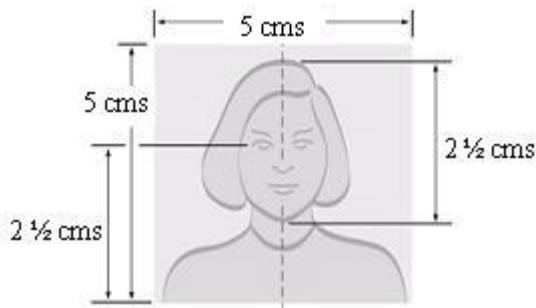
(Rev. IN02-39)

PLEASE TAKE YOUR PICTURE ACCORDING TO THE BELOW FORMAT AND MAKE SIX PHOTOS. TWO FOR THE VISA APPLICATION DESCRIBED BELOW AND FOUR FOR THE PEACE STUDENT APPLICATION

POR FAVOR, TOME SU FOTO DE ACUERDO AL FORMATO ANEXO. DEBERAN INCLUIR SEIS (6) FOTOS: DOS (2) PARA LA SOLICITUD DE VISA Y CUATRO (4) PARA LA APLICACION AL PROGRAMA (PEACE).

REQUISITOS DE LA FOTO

Por favor anexe una (1) fotografía a su solicitud. Lamentamos no poder aceptar fotografías que no cumplan con las siguientes especificaciones:



1. El tamaño debe ser, incluyendo el fondo, 2 pulgadas (más o menos 50 mm) por 2 pulgadas.
2. La foto debe ser reciente, tomada hace no más de seis meses.
3. El solicitante debe estar mirando a la cámara directamente (no puede estar mirando a la derecha o izquierda, hacia arriba o abajo) y la cara debe cubrir un 50% el área de la foto.
4. La cara completa debe salir en la foto. Desde la coronilla de la cabeza hasta la punta de la barbilla, y de oreja a oreja, preferiblemente con las orejas expuestas.
5. La foto debe ser a color en fondo blanco y sin brillo; no debe tener marco o borde alguno.



ProAmerican Educational And Cultural Exchange

40 WATER STREET * SUITE 700 * NEW PHILADELPHIA * PA 17959

**Please use black ink
only! Blue does not
photocopy well.**

STUDENT PROFILE

Application Date: --->	day	mo	year
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NICKNAME (apodo)			LAST NAME(s)(apellido solamente su padre)				FIRST (primer nombre)			MIDDLE (segundo nombre)					
Sex	Age	Birth day - mo - yr	Street (calle)				Development (colonia)								
Attach PHOTO			City(ciudad)				State (estado)		e-mail						
			Country of residence /pais de residencia		Postal Code	City, Country of Birth (ciudad, pais de nacimiento)			Citizenship (ciudadania)						
			Telephone (include country & city code)					Church Preference (iglesia)			Active				
			Height(ft.)	Weight(lbs)	< both >	Height(cm)	Weight(kgs)	Eye (ojos) color		Hair (pelos) color		Average			
			LIST BROTHERS & SISTERS (hermanos)					Sex	Age	School: (esc)		Little interest			
												Grade (grado) Now (7-12)	<input type="checkbox"/>	Point Average	<input type="checkbox"/>
												Years of Foreign Language in School: _____			
												Years of Foreign Language Private Lessons _____			
												Foreign Language Studied:			
												Do you smoke or chew tobacco? yes ___ no ___			
												Do you drink alcoholic beverages? yes ___ no ___			
IF DIVORCED, CIRCLE BELOW, WHICH PARENT YOU LIVE WITH															
FATHER STATUS -->	Living	Deceased	Married	Divorced	Guardian	MOTHER STATUS -->	Living	Deceased	Married	Divorced	Guardian				
Name (nombre de padre)					Age	Name (nombre de madre)					Age				
Cell phone (telefono celular)			Email			Cell phone (telefono celular)			Email						
Employer (compañía)				Country of Birth		Employer (compañía)				County of birth					
Occupation (ocupación)				Self-employed? Y / N Sp/Eng Bilingual? Y / N		Occupation (ocupación)				Self-employed? Y / N Sp/Eng Bilingual? Y / N					
Work Telephone (telefono del trabajo)			Fax Telephone			Work Telephone (telefono del trabajo)			Fax Telephone						
List name(s), address, telephone, and email of relatives living in the USA (or destination country, if not U.S.) and their relationship to you.						Emergency contact if parent not available (Contacto en emergencia si parent no disponible)									
Name _____ Relation _____ Addr _____ City _____ State _____ PC _____ Tel _____ Email _____						Name _____ Relation _____ Tel _____ Email _____									
Name _____ Relation _____ Addr _____ City _____ State _____ PC _____ Tel _____ Email _____						Places you have visited outside your country									
Name _____ Relation _____ Addr _____ City _____ State _____ PC _____ Tel _____ Email _____						Things your family does together:									
Signature of Student and Parent (Firme de el estudiante y de los padres)															

PERSONAL ATTITUDES of Name:

The purpose of this survey is to allow us to better know the desires of our participants. If we know what you hope to get from you with a family more able to help you achieve some of your priorities. So, tell us what is most and least important to you. But keep in mind that this is a tool to help the family choose a student, not a guarantee.

El propósito de este cuestionario es dar al programa un mejor punto de vista de tus perspectivas. Así sabremos que es lo que esperas o piensas ganar de esta experiencia y también entender tu temperamento y filosofía. Nosotros quizás podremos adaptarte a una familia compatible que te pueda ayudar a lograr tus actividades de interés. Explícanos lo más y menos importante para tí, contestando las 1as. catorce preguntas encerrando en un círculo el # mas cercano a tus expectativas.

EXPECTATIONS, DREAMS, GOALS, NEEDS, AND DESIRES

(EXPECTATIVAS, SUEÑOS, DESEOS, NECESIDADES, Y ANHELOS)

Circle best numbered answer; "X" blank lines # 7 & 10 Fill in parentheses () # 12, 13 Circle las preguntas. mejor; "X" en líneas # 7 & 14; vacías, () # 12, 13

**5 = absolute YES,
(absolutamente SI)**

**4 = much,
(bastante)**

**3 = maybe / somewhat,
(quizás/algunas)**

**2 = little,
(poco)**

**1 = absolute NO
(absolutamente NO)**

1. To travel and see cultural & historical areas	5 4 3 2 1	Viajar y aprender la cultura Americana y visitar áreas históricas
2. To do a lot of shopping and eat out frequently	5 4 3 2 1	Hacer bastantes compras o comes en restaurantes con frecuencia
3. To go out to parties and dances at night with friends	5 4 3 2 1	Salir a fiestas o ir a bailar en la noche con amigos.....
4. To talk & play games at home with family & relatives	5 4 3 2 1	Charlar y jugar en casa con familiares o parientes.....
5. To attend church regularly	5 4 3 2 1	Ir al iglesia regularmente
6. To attend professional concerts, plays, & art exhibits	5 4 3 2 1	Ir a conciertos musicales, juegos, exhibiciones de arte.....
7. To have pets: ____dogs ____cats other:_____	5 4 3 2 1	Tener ____perros ____gatos otro ()
8. To live in a very large family	5 4 3 2 1	Vivir con una familia grande
9. To be an only child	5 4 3 2 1	Ser hijo único
10. To have ____brother my age, ____sister my age be my best friend.	5 4 3 2 1	____ un hermano____ o una hermana de mi edad, y ser los amigos
11. To teach my host family and others about my country & language	5 4 3 2 1	Enseñar a mi familia anfitriona y mi escuela de mi país y idioma
12. To study a new subject(s):(_____)	5 4 3 2 1	Aprender un nuevo o (Menciona cual sería... _____)
13. To learn a new sport or skill: (_____)	5 4 3 2 1	Aprender un deporte nuevo o habilidad (Menciona cual sería...)

BELIEFS, HABITS & MANNERISMS Number best answers 5=Yes!, 4=much, 3=OK, 2=low, 1=No!

FILOSOFIA, BENEFICIOS, HABITOS PERSONALES Y COSTUMBRES Checa (x) or numero la mejor resp.

- Are you: ____ Protestant; ____ Catholic; ____ Jew; ____ Muslim; ____ Other (); ____ Agnostic (unsure); ____ Atheist
Eres: (Cristiano) (Católico) (Judío) (Muslim) Otro (Agnóstico) (Atea)
- Do you attend church more or less: ____ Weekly ; ____ Monthly ; ____ Only Holy Days, weddings, or funerals; ____ never
Vas la iglesia mas o menos: (semanalmente) (mensualmente) (solamente en días festivos) (nunca)
- Do you talk with God: ____ Hourly; ____ Daily; ____ Weekly; ____ Occasionally; ____ rarely; ____ never
Platicas con Dios: (c/hora) (diariamente) (semanalmente) (de vez en cuando) (rara vez) (nunca)
- Do you prefer to talk about: ____ people & feelings; -or- ____ ideas & events?
Prefieres hablar acerca: (de personas y sentimientos) -ó- (ideas y eventos)
- Are you: ____ mostly an optimist;
Eres: (mas optimista)
-or- are you ____ mostly a pessimist?
-ó- eres (mas pesimista)
- Do you: ____ express yourself easily [extroverted];
Te: (expresas facilmente de ti) [extrovertida]
-or- do you ____ keep feelings inside? [introverted]
-ó- te (guardas tus propios sentimientos) [introvertida]
- Are you usually: ____ a serious person;
Usualmente eres: (una persona seria y responsable)
-or- are you ____ a carefree person?
-ó- eres (una personaleres despreocupado)
- Do you look for: ____ a challenge;
Prefieres un (desafío)
-or- do you look for ____ the path of least resistance?
-ó- prefieres (el sendero de menos resistencia)
- Are you usually: ____ organized, punctual, and deliberate
Usualmente eres: (organizado, puntual, y deliberado)
-or- are you ____ disorganized, late, and impulsive?
-ó- (desorganizado, tarde, y impulsivo)
- Are you: ____ a morning person;
Eres: (persona madrugadora);
-or- are you ____ a night person?
-ó- eres (una persona nocturna)
- Do you prefer to: ____ lead; ____ follow;
Prefieres: (tomar la delantera) (seguir)
-or- ____ observe?
-ó- (observar)
- Do you prefer: ____ mental exercise; ____ physical exercise; -or- ____ both, equally?
Prefieres hacer: (ejercicios mentales) (ejercicios físicos) -ó- (los dos, iguales)
- Are you extremely intolerant or allergic to: ____ cigarette smoke; ____ animal hair; ____ dust & dirt? ____ Is it Controlled with medicine?
Me intolerante o alérgica a: (el olor al cigarro) (pelo de animales) (polvo y la suciedad) controlado con medicamentos
- Are you phobic or extremely bothered by: ____ disorder or sloppiness; ____ sickly or handicapped people; ____ little kids?
Me fóbica o molesta demaciado fóbica: (desorden o descuido) (personas descapacitadas o enfermas) (niños)
- Do you enjoy the company of: ____ elderly adults; ____ very young children?
Disfrutas la compañía de: (ancianos) (niños pequeños)
- Are most of your friends: ____ older than you; ____ the same age; ____ younger?
La mayoría de tus amigos son: (mayores que tu) (de la misma edad) (menores)



ACTIVITIES & INTERESTS of STUDENT:

(X) in the "NOW" box, all activities you are currently participating in or have recently. Fill in the NOW box black instead of X, your 6 favorites.
 (X) the "ES" box activities you want to try as an exchange student. (minimum 1/column) Fill in the ES box black the 6 activities you want to do most.

In the Competitive Sport category, on the line after the sport checked, if you played on a school team print "schl", if you played on a community league team print "club", or if you play that sport just for fun (not on a team) print "fun". If you played a sport on a school team that competed against other schools, you must bring a letter from your school director certifying which sport(s) you played and which years from grades 912 to determine your eligibility as an exchange student. If you received recognition, note with a * aside the box. Add comments in the 3 Awards boxes or attach certificates.

Señala con una (X) en el casillero "NOW", todas las actividades en las que estás participando actualmente o has participado recientemente. Llena el casillero "NOW" en vez de poner una X en tus 6 actividades favoritas. Señala con una (X) en el casillero "ES" en todas aquellas actividades que te gustaría intentar realizar durante tu intercambio cultural (mínimo 1 por columna). Llena el casillero "ES" en vez de poner una X en tus 6 actividades favoritas.

En la categoría de deportes competitivos, en la línea luego de señalar el deporte, escribe "schl" si tú lo practicas dentro del equipo de tu escuela, escribe "club" si tú juegas dentro de la liga deportiva de tu ciudad, o escribe "diversión" si tu juegas solo por diversión (no en un equipo). Si tú practicas un deporte en el equipo de tu escuela y has competido con otras escuelas, deberás traer una carta del director de tu escuela certificando tu participación en ese deporte y en que años entre el 9 y 12 para determinar tu aceptación como estudiante de intercambio. Si has recibido reconocimientos, pon un asterisco * al lado del casillero. Incluye comentarios en los casilleros de premios o adjunta certificados.

Academic Societies & Clubs

- | | |
|--------------------------|---|
| NOW | ES |
| <input type="checkbox"/> | <input type="checkbox"/> History or Political Club |
| <input type="checkbox"/> | <input type="checkbox"/> Mathematics Club |
| <input type="checkbox"/> | <input type="checkbox"/> Business/ Economics Club |
| <input type="checkbox"/> | <input type="checkbox"/> Foreign Language Club |
| <input type="checkbox"/> | <input type="checkbox"/> Science Club or Project |
| <input type="checkbox"/> | <input type="checkbox"/> Astronomy Club |
| <input type="checkbox"/> | <input type="checkbox"/> Chess Club |
| <input type="checkbox"/> | <input type="checkbox"/> Computer Club |
| <input type="checkbox"/> | <input type="checkbox"/> School Newspaper |
| <input type="checkbox"/> | <input type="checkbox"/> Yearbook Staff |
| <input type="checkbox"/> | <input type="checkbox"/> Debating Society |
| <input type="checkbox"/> | <input type="checkbox"/> Jr. Council on World Affairs |
| <input type="checkbox"/> | <input type="checkbox"/> Student Government |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ |

Competitive Sports

- | | | |
|--------------------------|--|--|
| NOW | ES | (note if schl team, area club, or fun) |
| <input type="checkbox"/> | <input type="checkbox"/> Baseball/Softball _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> American Football _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Basketball _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Track & Field Athletics _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Soccer (Futbol) _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Field or Ice Hockey _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Volleyball _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Swimming /Diving _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Tennis _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Bowling _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Golf _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Gymnastics _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Snow Skiing _____ | |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ | |

Performing & Other Creative Arts

- | | | | |
|--------------------------|--|--------------------------|---|
| NOW | ES | NOW | ES |
| <input type="checkbox"/> | <input type="checkbox"/> Marching Band _____ | <input type="checkbox"/> | <input type="checkbox"/> Rock Band _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Orchestra _____ | <input type="checkbox"/> | <input type="checkbox"/> Ensemble _____ |
| Your Instruments: _____ | | | |
| <input type="checkbox"/> | <input type="checkbox"/> Acoustic Guitar _____ | <input type="checkbox"/> | <input type="checkbox"/> Piano _____ |
| <input type="checkbox"/> | <input type="checkbox"/> School Chorus or Church Choir _____ | <input type="checkbox"/> | <input type="checkbox"/> Modeling _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Drama Club: _____ | <input type="checkbox"/> | <input type="checkbox"/> Stage Dance: specialty _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Variety/Talent Show: _____ | <input type="checkbox"/> | <input type="checkbox"/> Cheerleading <input type="checkbox"/> baton or flags _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Drawing, Painting _____ | <input type="checkbox"/> | <input type="checkbox"/> Ceramics, Sculpture, Crafts _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Photography _____ | <input type="checkbox"/> | <input type="checkbox"/> Cameraman _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ | <input type="checkbox"/> | <input type="checkbox"/> Other _____ |

FAVORITE SCHOOL SUBJECTS:

FAVORITE FOODS:

FAVORITE PETS:

ACADEMIC AWARDS

ATHLETIC AWARDS

OTHER AWARDS

Special Interest Activities or Clubs

- | | |
|--------------------------|---|
| NOW | ES |
| <input type="checkbox"/> | <input type="checkbox"/> Hunting <input type="checkbox"/> Fishing _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Target Shooting (Gun or Bow?) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Cooking _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Auto Mechanics _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Woodworking / Carpentry _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Electronics _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Equestrian (Horseback riding) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Junior ROTC (military) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> 4-H Club (farming, ranching) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> YMCA/YWCA _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Weightlifting & Nautilus _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Aerobic Dance/Exercise _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Team Med. Asst Equip. Mgr _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ |

Church & Community Service Orgs

- | | |
|--------------------------|---|
| NOW | ES |
| <input type="checkbox"/> | <input type="checkbox"/> Church Affiliation _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Bible Study Club _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Church Youth Group _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Church Choir _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Homeless Shelter Volunteer _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Ecology Conservation Group _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Hospital, Nursing Home volunteer _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Animal Shelter Volunteer _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Boy Scouts or Girl Scouts _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Key Club (Community Service) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Emergency Medical or Fire Asst. _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Tutoring HS Children _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Nursery or Pre-School Volunteer _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ |

Personal Non-organized Activity

- | | |
|--------------------------|--|
| NOW | ES |
| <input type="checkbox"/> | <input type="checkbox"/> Roller Skating <input type="checkbox"/> Ice Skating _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Bicycling _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Hiking, Walking, Jogging _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Camping _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Extreme Water sports _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Casual Water sports _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Motorcycle, ATV, etc. _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Racquetball & Handball _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Collecting (stamps, coins, etc.) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Video & Computer Games _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Museums, Natl. Parks, Exhibits _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Reading <input type="checkbox"/> Writing _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Gardening <input type="checkbox"/> Babysitting _____ |
| <input type="checkbox"/> | <input type="checkbox"/> Other _____ |

This information will be used by host families to determine if you fit their lifestyle and available activities in their school and community. Therefore, it is important to accurately describing what you do and what you think you want to try when you get here -- or you will disappoint both yourself and your hosts after you arrive. When you arrive, we want you to write and tell us what you are doing here, so that we can recognize you in our newsletter. In March we will mail you a form similar to this to see what you have done as an exchange student, because on our Spring Trip Awards Banquet, trophies & medals are given to top students in academics, athletics, arts, public speaking, & Christian service. Ribbons are given to all for their participation in those categories. So if you want recognition you must tell us.

Esta información será utilizada por las familias anfitrionas para determinar si encajas dentro de su estilo de vida y la disponibilidad de esas actividades en su escuela y comunidad. Sin embargo, es importante describir cuidadosamente lo que haces y te gustaría hacer o te sentirás decepcionado y decepcionarás a tu familia luego de tu llegada. Cuando arrives, queremos que nos escribas y nos digas lo que estás haciendo para que podamos reconocerte a través de nuestro periódico. En el mes de Marzo te enviaremos un formulario similar a éste para saber lo que has hecho como estudiante de intercambio, porque en el Banquete en el Viaje Cultural, trofeos y medallas serán entregados a los mejores estudiantes académicos, deportivos, artísticos, presentaciones públicas y servicio cristiano. Cintas son entregadas a todos por su participación en esas categorías. Así es que si quieres reconocimiento debes decírnos.

PERSONAL ESSAY of

Type or print in black ink, in the language of your HOST country (they don't read yours). This is a very important part of your application. It must reflect your feelings and attitudes and demonstrate your foreign language skills - not someone else's. Families choose their student based on the kind of person they perceive you to be. We want to know your serious thoughts as much as what you do for fun. Describe yourself as a person and your relationship with your family. Don't repeat data from the first page. Describe your typical routine. Share some of your personal goals, why you wanted to be an exchange student and why you'd be a good ambassador of your country. Sign your name.

photo



signature (firme)

FOREIGN LANGUAGE ABILITY

INTERVIEW MUST BE CONDUCTED BY STUDENT'S TEACHER
IN THE FOREIGN LANGUAGE OF THE DESTINATION COUNTRY
(i.e. English if the student's destination is The United States, Spanish if Latin America, French if Quebec, Canada)

Applicant: Last Name: _____ First Name: _____

Applicant has studied (a foreign language) how many years? _____ English _____ Spanish _____ French

Directions to the interviewer: The purpose of this form is to determine the participant's ability in the language of the host county. To help us place students in high schools with appropriate instructional programs, it is important that you be accurate in your rating. Rating a student higher than actual ability could result in severe problems for the student, school, and family.

Reading: Given an article of at least five paragraphs from a newspaper or magazine in the language of the host country (pronunciation may be odd, as long as the student's understanding of the meaning is correct), the student is able to:

- Excellent Read it aloud with few errors and explain its meaning clearly and completely (understands at least 9 out of 10 words).
- Good Read it aloud except for difficult terms or place names, and explain most of its meaning (understands at least 7-8 out of 10 words).
- Fair Read most of the basic vocabulary and explain the basic idea of the article (understands at least 5-6 out of every words).
- Poor Read and understand only the simplest words (understands 1-4 of every 10 words), and can explain little or none, of the articles meaning.

Writing: Ask to write a short essay stating an opinion about his or her school, town political views, sports interests, etc.

- Excellent Writes with near fluency using lengthy sentences, abstract terms, and strong vocabulary. Uses proper grammar rather than composing the grammar of the student's native language.
- Good Uses good vocabulary, sentences are lengthy and sensible, but grammar is sometimes irregular.
- Fair Can make only simple sentences using limited, or basic vocabulary. Grammar is extremely irregular, but understandable.
- Poor Doesn't make complete sentences or uses short basic ones, with limited vocabulary. It is difficult to understand what the student means at times.

Comments: _____

**INTERVIEW MUST BE CONDUCTED BY STUDENT'S TEACHER
IN THE FOREIGN LANGUAGE OF THE DESTINATION COUNTRY**

**FOREIGN
LANGUAGE
ABILITY**

STUDENT NAME:

Speaking and Understanding Conversation: After engaging applicant in **at least 15 minutes of active conversation** in the target host country language, relating my views on current topics (being careful to use both abstract terms and idiomatic phrases), and requesting his or her views, I rate the student's ability to speak and understand conversation to be:

- excellent 10 Absolute proficiency in target language. Student is able to both understand and converse, using sophisticated vocabulary and clear, correct sentence structure. Has no trouble with abstract subjects, or most idiom. Can think in target language of outbound student's destination (host country).
- 9 Students possesses near fluency in target language. Sentence structures are nearly perfect. Can understand and respond and respond to difficult questions. Target language knowledge includes abstract terms. Will have no problem at all communicating when he/she arrives in the host country.
- good 8 Responses, although not perfect come naturally. In other words, student responds evidently in target language. Has a good vocabulary and understands almost everything. Can respond intelligently; however, needs practice.
- 7 Student can understand most conversation. Speaking ability is good, but needs practice. Can go beyond basic responses and can elaborate thoughts, but needs to think before responding.
- 6 Student understands the basics of target language. Vocabulary includes most common terms. Thinks quickly; however, it is evident that he/she is translating. Gets lost when conversation involves abstract terms. Makes mistakes, but is understandable. Can carry on a basic conversation.
- fair 5 Student can understand much more than he/she can communicate; however, tries. Can respond sentence form even if grammar and structure are not perfect. Student is understandable.
- 4 Student is evidently understanding basic sentences and is able to respond even if only in words or phrases. Grammar and sentence construction is poor, but understandable. (a few weeks of total immersion will improve his/her abilities rapidly.)
- poor 3 Student understands words, or phrases but not sentence thoughts. Speaking ability is limited to a few words and may even refuse to use target language initially.
- 2 Student understands a few words and phrases, but has little or no ability to communicate beyond this.
- 1 Student cannot understand any conversation and understands little or none of host country language.

It is apparent that, regardless of the level of academic language proficiency in a foreign language, there will be periods of difficulty and frustration for any foreign exchange student trying to function in full-time immersion during a five or ten month stay abroad. In the space provided below, please share your insights into the applicant's language ability, aptitude, motivation, and study habits. These will be extremely helpful in predicting the applicant's academic success in the program.

I _____, am
Foreign Language Teacher's Name

[] Current Year Foreign Language Teacher
[] Past Year Foreign Language Teacher
[] Current Year Private Tutor

Interviewers Signature

Title or Capacity

School where interview was held

Date

ACADEMIC HISTORY

STUDENT NAME: _____

[x] Check the box above your grading scale from those listed on the left

Superior	98-100%	A+	20	10	5.0	superior	_____
Outstanding	94-97 %	A	19	9.5	4.7	alto excelante	_____
Excellent	90-93 %	A-	18	9.0	4.3	excelante	_____
Very Good	88-89 %	B+	17	8.8	4.0	muy bien	_____
Good	84-87 %	B	16	8.5	3.7	bien	_____
Above Average	80-83 %	B-	15	8.0	3.3	alto regular	_____
Fair	78-79 %	C+	14	7.8	3.0	mediano	_____
Average	74-77 %	C	13	7.5	2.7	regular	_____
Mediocre	70-73 %	C-	12	7.0	2.3	mediocre	_____
Below Average	68-69 %	D+	11	6.8	2.0	menos regular	_____
Substandard	64-67 %	D	10	6.5	1.7	bajo	_____

Translate below, courses taken from 9th grade to present / Traducir abajo los cursos desde el 9 grado hasta el presente
 Attach original copy of corresponding school transcript / Incluya la copia original de la transcripcion escolar

Year _____ to _____			
9th year courses	1st semester	2nd semester	final grade
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Year _____ to _____			
11th year courses	1st semester	2nd semester	final grade
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Year _____ to _____			
10th year courses	1st semester	2nd semester	final grade
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

Year _____ to _____			
12th year courses	1st semester	2nd semester	final grade
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

signature of translator / firma de traductor

title of translator / titulo de traductor

date / fecha

OFFICIAL SCHOOL STAMP / SELLO OFICIAL DE LA ESCUELA

ProAmerican Educational And Cultural Exchange

WORLD HEADQUARTERS * 40 WATER STREET, SUITE 700 * NEW PHILADELPHIA, PENNSYLVANIA *17959*USA



Academic Reference

SCHOOL:	<input type="text"/>
PRINCIPAL:	<input type="text"/>
COUNSELOR:	<input type="text"/>
ADDRESS:	<input type="text"/>
CITY, STATE, ZIP:	<input type="text"/>
TELEPHONE:	<input type="text"/>

[] public
[] private

HAS APPLIED TO BE A FOREIGN EXCHANGE STUDENT. PLEASE COMPARE THIS STUDENT TO OTHERS YOU HAVE KNOWN BY ANSWERING THE BELOW LISTED QUESTIONS AND RETURN THIS FORM IN THE ENCLOSED ENVELOPE.

A = ABOVE AVERAGE; B = AVERAGE; C = BELOW AVERAGE; U = UNKNOWN TO YOU

	A	B	C	U
Intellectual Capacity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Knowledge of current events	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Artistic / Creative talents	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sense of humor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sense of adventure / Curiosity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maturity / Emotional stability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Independence / Self-reliance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ability to express oneself	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Open-mindedness / Flexibility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Effectiveness with peers	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Effectiveness with adults	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Relationship with family	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Assertiveness	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Appreciativeness/Social graces	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Honesty / Integrity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Reliability / Responsibility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Concern for others / Charity	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Church / Community service	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leadership ability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ability to accept failure	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Realistic goals & expectations	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please add any comments that you think would be helpful in the evaluation of this applicant as to whether he/she would make a positive or negative impression abroad. (ENGLISH ONLY, PLEASE)

NAME, TITLE & SIGNATURE OF SCHOOL OFFICIAL EVALUATING OUR STUDENT

DATE

ProAmerican Educational And Cultural Exchange

WORLD HEADQUARTERS * 40 WATER STREET, SUITE 700 * NEW PHILADELPHIA, PENNSYLVANIA * 17959 * USA



Immunization Record (Archivo de Inmunización)

Student (Estudiante) _____ Birthdate (fecha de nacimiento) _____

Address (dirección) _____

City (Ciudad) _____ State (Estado) _____

Country (país) _____ Telephone (telefono) _____

ATTN: DOCTOR: Pupils enrolled in grades k-12 are required by law to have on file at their school that they have been immunized against DTP (diphtheria, tetanus, & pertussis); poliomyelitis; chickenpox, MMR (measles, mumps, & rubella) and also be tested for Tuberculosis. Failure to do so will result in exclusion from school. If the dates of vaccinations are not current according to the RECOMMENDED IMMUNIZATIONS schedule below, please reimunize the student at this time.

Polio must show three dates; Td and MMR must show two dates—initial vaccine & another within the past 10 years.

Copies of Spanish documents will not be accepted. If you must update this information again, COMPLETE a new form.

Es necesario que todo estudiante de preparatoria presente su historial de vacunas aplicadas durante todas su vida, ya que todas las escuelas verifican cuidadosamente la parte medica. Deberan de tener las inmunizaciones contra DTP (vacuna triple), poliomelitis, varicela, paperas, sarampión y rubeola. Si no cumplen con este requisito no seran aceptados en la escuela. Si al estudiante le falta alguna vacuna, apliquela antes de que salga de su país nativo. Debes tener tres fechas para polio, Td y MMR deben tener dos fechas--vacuna inicial y otro dentro de 10 años. Copias de documentos en español no pueden ser aceptadas. Si Ud. debe actualizar esta información nuevamente, use un nuevo formulario. Copias de documentos en español no acepta

Immunizations Required for School Admittance (Inmunizaciones Requeridas para Admision en la Escuela)

 DIVISION OF COMMUNICABLE DISEASE CONTROL P.O. BOX 90 HARRISBURG, PA 17108	ENTER DATE ONLY IF DISEASE CONTRACTED (Señalar abajo fechas Solo si ha tenido la enfermedad escribe fechas: mm/dd/aa)							ENTER BELOW THE DATES OF ALL VACCINATIONS IN THE PAST (Señalar abajo fechas de aplicación de las vacunas en años pasados) escribe fechas: mm/dd/aa							ONLY TODAY'S VACCINATION (Señalar abajo vacunas de hoy) mm/dd/aa																																																																						
REQUIRED IMMUNIZATIONS (INMUNIZACIONES REQUERIDAS) <table border="1"> <thead> <tr> <th rowspan="2">AGE</th> <th colspan="7">VACCINES</th> </tr> <tr> <th>DTP</th> <th>Td</th> <th>POLIO</th> <th>MMR</th> <th>HIB</th> <th>Hep B</th> <th>MCV</th> </tr> </thead> <tbody> <tr> <td>2 months</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4 months</td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>6 months</td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>15 months</td> <td>X</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>24 months</td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4 to 6 years</td> <td></td> <td></td> <td></td> <td></td> <td>X</td> <td></td> <td></td> </tr> <tr> <td>Every 10 years thereafter</td> <td>X</td> <td></td> <td>X</td> <td></td> <td>X</td> <td></td> <td></td> </tr> </tbody> </table> KEY <p>DTP Combined diphtheria, tetanus and acellular pertussis Td Combined tetanus & diphtheria given after six years of age</p> <p>TOPV Polio</p> <p>MMR Combined measles, mumps and rubella</p> <p>HIB Haemophilus Influenzae b</p> <p>HEP Hepatitis B</p> <p>CP Chicken Pox (Varicella)</p> <p>MCV Meningitis (meningococcal conjugate vaccine)</p>	AGE	VACCINES							DTP	Td	POLIO	MMR	HIB	Hep B	MCV	2 months								4 months	X		X					6 months	X		X					15 months	X							24 months	X		X					4 to 6 years					X			Every 10 years thereafter	X		X		X			DTP TOPV HEP B Measles Mumps Rubella Chickenpox (varicella) Meningitis													
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Tuberculosis IINE [] or PPD [] Date _____ Pos. [] or Neg [] TB Vaccine: (opcional) No[] Yes[] Date _____

Chest X-ray: (not necessary if Iine or PPD is negative/ no necesario, si negativo Iine o PPD) Date _____ Positive [] or Negative []

Type Name of Physician: _____ Signature: _____

Address: _____ Tel: _____

We certify that we have reviewed the Health Questionnaire and information supplied by us, and that it is true and complete to the best of our knowledge. We authorize any of the doctors, hospitals, or clinics mentioned above to furnish a complete transcript of medical records for the purpose of processing this application

Signature of Student: _____ Signature of Parent: _____ Date: _____



Clinical Examination by family physician

STUDENT: _____

Please examined this student and also inquired as to whether he or she has been counseled for bulimia, anorexia, sexual abuse, other emotional problems or traumatic events in the past five years.

If yes, on the reverse side of this form explain conditions, causes, dates, treatments, current status, and present recommendations to your patient.

Additional remarks are to be found on
the reverse of this form. Circle: YES NO

signature of examining physician

Normal	Check Each Item	Abnormal	Normal	Check Each Item	Abnormal
_____	Head, Face, Neck, Scalp	_____	_____	Obesity, Bulimia, or Anorexia	_____
_____	Nose	_____	_____	Anus and Rectum	_____
_____	Sinuses	_____	_____	Endocrine System	_____
_____	Mouth and Throat	_____	_____	G - U System	_____
_____	Ears - General (int. & ext.)	_____	_____	Upper Extremities	_____
_____	Drums (perforated)	_____	_____	Feet	_____
_____	Eyes	_____	_____	Lower Extremities	_____
_____	Ophthalmoscopic	_____	_____	Spine, other Musculoskeletal	_____
_____	Pupils	_____	_____	Body Marks, Scars, Tattoos	_____
_____	Ocular Motility	_____	_____	Skin, Lymphatics	_____
_____	Lungs and Chest	_____	_____	Neurologic	_____
_____	Heart	_____	_____	Psychiatric	_____
_____	Vascular System	_____	_____	Pelvic (female only)	_____
_____	Abdomen and Viscera	_____	_____	Check how done:	

Measurements and Other Findings

Height: _____ ft. _____ in. Weight: _____ pounds Color Hair: _____ Color Eyes: _____ Build: thin_____ medium_____ heavy_____

Blood Pressure

Sitting: _____ Recumbent: _____ Standing: _____

Pulse (arm at heart level)

Sitting: _____ After Exercise: _____ 2 Min. After: _____ Recumbent: _____ After Standing 3 Minutes: _____

Laboratory Findings

Urinalysis (A. Specific Gravity): Albumin _____ Sugar _____ Serology (Specify Test): _____ Blood Type & RH Factor: _____

I certify that I have inquired into the history of and examined the above named student according to the above instructions and report my findings here. I find him or her to be sufficiently fit to travel and engage in an active lifestyle far from home that may be physically and mentally challenging. I have reimmunized for school entrance according to the attached Required Immunizations chart.

Type Name of Physician: _____ Signature: _____

Address: _____ *Date of Exam:* _____

<u>ODONTOLOGY</u>																
Place appropriate symbols, showing in examples: (o) Restorable teeth; (*) Non-restorable; (-) Missing teeth; (+) Replaced by dentures; (@) fixed)																
R I G H T	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16								L E F T							
32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17																
Remarks and additional dental defects and diseases																
Name of Dentist								Signature & Registration Numbers								
Date								Please attach details of any ongoing orthodontic plan in order to assure continuation while in the States. <hr/> <hr/>								

Pro-American Educational And Cultural Exchange

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Health Questionnaire

Student's Name: _____

Date of Birth: _____

Parent's Name: _____

Address: _____

City & State: _____

Country: _____

Telephone: _____

Past Medical History:

Measles.....	No	Yes	Venereal Disease.....	No	Yes	Bulimia or Anorexia	No	Yes
Mumps.....	No	Yes	Concussion or Head Injuries.....	No	Yes	Strokes.....	No	Yes
Chickenpox.....	No	Yes	Rheumatic Fever or Heart Disease.....	No	Yes	Tuberculosis.....	No	Yes
Epilepsy.....	No	Yes	Have you had any other serious illness.	No	Yes	Broken bones.....	No	Yes
Diabetes.....	No	Yes	If yes, what? _____			Cancer.....	No	Yes

Have you ever been hospitalized, had surgery, or been under extended medical care?..... No Yes If yes, for what reason?

Systemic Review:

Eyes-Ears-Nose-Throat:

Eye disease or injury.....	No	Yes
Do you wear glasses.....	No	Yes
Double vision.....	No	Yes
Headaches.....	No	Yes
Glaucoma.....	No	Yes
Nosebleeds.....	No	Yes
Chronic sinus trouble.....	No	Yes
Ear disease.....	No	Yes
Impaired hearing.....	No	Yes
Do you wear hearing aids.....	No	Yes
Dizziness.....	No	Yes
Episodes of unconsciousness....	No	Yes

Skin:

Skin disease, hives, eczema.....	No	Yes
Jaundice.....	No	Yes
Frequent infection or boils.....	No	Yes
Abnormal pigmentation.....	No	Yes

Neck:

Stiffness.....	No	Yes
Thyroid trouble.....	No	Yes
Enlarged glands.....	No	Yes

Respiratory:

Spitting up blood.....	No	Yes
Chronic or frequent cough.....	No	Yes

Have you been in good health most of your life?..... No Yes If not, please explain?

Allergies and Sensitivities:

Penicillin or other antibiotics.....	No	Yes	Novocaine or other anesthetics.	No	Yes	Any other allergies?.. No
Morphine, Codeine, Demerol, other narcotics....	No	Yes	Sulfa Drugs.....	No	Yes	If yes, please list? _____
Aspirin, empirin or other pain remedies.....	No	Yes	Adhesive tape.....	No	Yes	_____
Tetanus antitoxin or other serums.....	No	Yes	Iodine or merthiolate.....	No	Yes	_____
Any foods, such as egg, milk or choco-	No	Yes	Any other drug or medication....	No	Yes	_____

Which allergies are the most problematic? _____

How well do you manage them? _____

How do you manage them? _____

Neuro-Psychiatric:

Have you ever had psychiatric counseling or therapy?.....	No	Yes	Please explain, if yes _____
Have you even been advised to see a psychologist?.....	No	Yes	_____
Have you ever had fainting spells?.....	No	Yes	_____

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TEL 570-277-6621 FAX 570-277-0607 E-MAIL paz@peace-inc.org



AUTHORIZATION TO TREAT A MINOR (Autorización del Trato a Menores)

HOSTS: KEEP A COPY IN EACH CAR AT ALL TIMES

(student's name)

I (we) the undersigned parent(s) or legal guardian(s) of _____

a minor dependant, do authorize and consent to any _____
x-ray, EKG, MRI, CAT or other examination, anesthetic, medical or surgical diagnosis rendered under the general or specific supervision of any member of the medical staff and emergency room staff licensed under the provisions of the U.S. Medicine Practice Act (or it's foreign counter part if for a USA student abroad) or a dentist licensed under the provisions of the U.S. Dental Practice Act (or it's foreign counterpart if for a USA student abroad) and on the staff of any acute care facility or general hospital holding a current license to operate as the same. I (we) understand this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his best judgement may be deemed advisable. I/we understand that reasonable effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatment will not be withheld if the undersigned cannot be reached. Furthermore, I/we assure that I/we have read the PEACE group accident/medical insurance policy provisions and understand that there are deductibles, co-payments, and non-covered items, and that I/we will reimburse any expenditures not covered by the policy. I/We absolve members of PEACE, the host family, school, or other person(s) who take our child to any licensed medical provider, of any responsibilities that said guardian may inadvertently assume by way of signing our child into the care of such provider(s). I/we authorize release to any PEACE representative or host parent all medical records pertaining to treatment of the above named student during his/her time as an exchange student. A claim form signed by the student is needed to assign direct payment for medical care. (http://www.peace-inc.org/Index/AIG_ClaimForm.pdf)

Yo (nosotros) el(los) abajo firmante(s) padre(s) o custodio(s) legal(es) de un menor dependiente, autorizo(autorizamos) y consiento(consentimos) que mi(nuestro) representado sea examinado con rayos-X, EKG, MRI, CAT o cualquier otro examen, se le aplique anestesia o se le someta a diagnóstico médico o quirúrgico, específico o general, bajo la supervisión de algún miembro del cuerpo médico y/o de la sala de emergencias, acreditado bajo el Estatuto de la Práctica Médica de los EE.UU (o su contraparte en el extranjero, si el estudiante se encuentra fuera del país) o un dentista acreditado bajo el Estatuto de la Práctica Dental de los EE.UU (o su contraparte en el extranjero, si el estudiante se encuentra fuera del país) y por el personal de cualquier centro de cuidado intensivo u hospital general que posea licencia vigente para operar como tal. Yo (nosotros) entiendo (entendemos) que esta autorización es otorgada con antelación a cualquier diagnóstico, tratamiento, o cuidado hospitalario que se requiera; pero esto se hace para otorgar autoridad y poder de decisión a los médicos, al escoger el tratamiento que a su juicio estimen aconsejable. Yo (nosotros) entiendo(entendemos) que un esfuerzo razonable deberá hacerse para localizar a el(los) abajo firmante(s) antes de aplicar el tratamiento al paciente; pero que ninguno de estos tratamientos será detenido si los abajo firmantes no son localizados. Además, yo (nosotros) confirmo(confirmamos) que he (hemos) leído los estatutos del seguro médico y de accidentes de PEACE y entiendo(entendemos) que existen deducibles, pagos adicionales, y renglones no cubiertos, y que yo(nosotros) reembolsaremos cualquier gasto no cubierto por la póliza del seguro. Yo (Nosotros) libero (liberamos), a los miembros de P.E.A.C.E, la familia anfitriona, el colegio u otra(s) persona(s) que debe(n) trasladar a mi/nuestro(a) hijo(a) a un proveedor acreditado de servicios médicos, de toda responsabilidad que inadvertidamente puedan asumir al autorizar que mi/nuestro(a) hijo(a) quede bajo el cuidado de dicho proveedor. Yo autorizo facilitar a los representantes o familias anfitrionas de PEACE los records médicos pertenecientes al tratamiento del estudiante mencionado, durante su tiempo como estudiante de intercambio. Una petición firmada por el estudiante es necesaria para reclamar el reembolso o autorizar el pago directo por cuidados médicos. (http://www.peace-inc.org/Index/AIG_ClaimForm.pdf)

Physical restrictions (Enlista cualquier restricción): _____

Allergies to drugs or food (Alergias a drogas y comidas): _____

Medications taken regularly (Medicinas que tome regularmente): _____

Other special needs (otras necesidades especiales): _____

Date of last tetanus toxide booster (fecha de la ultima vacuna contra tetanos): _____

Family physician (doctor de familia): _____ Phone (telefono): _____

Address (dirección): _____ City (ciudad): _____

State (estado): _____ Country (país): _____ Zip (postal) code: _____

Signature of both parents or guardians: _____ Date: _____
(firma de ambos padres o tutor(es)) (fecha)

Family Address: _____

(dirección de familia) _____

Telephone where parents may be reached (business) _____ (home) _____
(telefono de padres) (negocio) (casa) _____

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Personal Reference from Community

for
STUDENT _____
CITY & STATE _____
COUNTRY _____

THE ABOVE NAMED PERSON HAS APPLIED TO BE A FOREIGN EXCHANGE STUDENT. PLEASE COMPARE THIS STUDENT TO OTHERS YOU HAVE KNOWN BY ANSWERING THE BELOW LISTED QUESTIONS AND RETURNING THIS FORM IN THE ENCLOSED ENVELOPE. YOU SHOULD BE AN ADULT OVER AGE 30 AND NOT A RELATIVE OF THIS APPLICANT.

		A	B	C	U
Intellectual Capacity	(Capacidad Intelectual).....	—	—	—	—
Knowledge of current events	(Sabe algo del mundo actual).....	—	—	—	—
Artistic / Creative talents	(Creatividad / talentos artisticos).....	—	—	—	—
Sense of humor	(Sentido del humor).....	—	—	—	—
Sense of adventure / Curiosity	(Sentido de aventura / curiosidad).....	—	—	—	—
Maturity / Emotional stability	(Estabilidad emocional / madurez).....	—	—	—	—
Independence / Self-reliance	(Independiente /Puede valerse por si mismo).....	—	—	—	—
Ability to express oneself	(Habilidad de expresarse de uno mismo).....	—	—	—	—
Open-mindedness / Flexibility	(Mente abierta / flexibilidad).....	—	—	—	—
Effectiveness with peers	(Efectividad en mantener relaciones).....	—	—	—	—
Effectiveness with adults	(Que tan bueno es con adultos).....	—	—	—	—
Relationship with family	(Relaciones con su familia).....	—	—	—	—
Assertiveness	(Modales).....	—	—	—	—
Appreciativeness / Social graces	(Apreciación / Gracia social).....	—	—	—	—
Honesty / Integrity	(Honestidad / Integridad).....	—	—	—	—
Reliability / Responsibility	(Confiable / Responsable).....	—	—	—	—

Please add any comments that you think would be helpful in the evaluation of this applicant as to whether he/she would make a positive or negative impression abroad. (ENGLISH ONLY PLEASE)

NAME OF EVALUATOR

SIGNATURE

RELATIONSHIP TO OUR APPLICANT

DATE

ProAmerican Educational And Cultural Exchange

WORLD HEADQUARTERS * 40 WATER STREET, SUITE 700 * NEW PHILADELPHIA, PENNSYLVANIA *17959*USA



Personal Reference from Community

for
STUDENT _____

CITY & STATE _____

COUNTRY _____

THE ABOVE NAMED PERSON HAS APPLIED TO BE A FOREIGN EXCHANGE STUDENT. PLEASE COMPARE THIS STUDENT TO OTHERS YOU HAVE KNOWN BY ANSWERING THE BELOW LISTED QUESTIONS AND RETURNING THIS FORM IN THE ENCLOSED ENVELOPE. YOU SHOULD BE AN ADULT OVER AGE 30 AND NOT A RELATIVE OF THIS APPLICANT.

A = ABOVE AVERAGE; (superior) **B = AVERAGE; (regular)** **C = BELOW AVERAGE; (menos)** **U = UNKNOWN TO YOU (no se sabe)**

	<i>A</i>	<i>B</i>	<i>C</i>	<i>U</i>
Intellectual Capacity				
Knowledge of current events				
Artistic / Creative talents				
Sense of humor				
Sense of adventure / Curiosity				
Maturity / Emotional stability				
Independence / Self-reliance				
Ability to express oneself				
Open-mindedness / Flexibility				
Effectiveness with peers				
Effectiveness with adults				
Relationship with family				
Assertiveness				
Appreciativeness / Social graces				
Honesty / Integrity				
Reliability / Responsibility				

Please add any comments that you think would be helpful in the evaluation of this applicant as to whether he/she would make a positive or negative impression abroad. (ENGLISH ONLY PLEASE)

NAME OF EVALUATOR

SIGNATURE

RELATIONSHIP TO OUR APPLICANT

DATE



Compromiso Del Estudiante

STUDENT AGREEMENT

Si se me aceptan como participante de PEACE. Estoy de acuerdo en obedecer las siguientes reglas y cualquier otro requerimiento que sea establecido o publicado en el programa.

Ya que voy a estar viviendo en la casa de otra familia, no como un invitado sino como miembro de ella, acepto respetar a los padres de esa casa como a los míos, obedecer las reglas de su casa, participar en las tradiciones de la familia, mantener mi cuarto limpio y presentable, respetar pertenencias personales de la familia, y compartir las responsabilidades de la familia cuando me pidan ayudarlos con las mismas.

No haré uso de tabaco, bebidas alcohólicas o narcóticos, tampoco haré uso de malas palabras o lenguaje irrespetuoso, o participaré en actividades inmorales, en actos violentos, o ilegales. Honraré a mi Dios, mi ciudad y país, a mi familia en todo lo que yo haga o diga. Nunca he sido expulsado de mi escuela por ninguna de las razones anteriores. Yo autorizo a cualquier agencia de gobierno, facilidades médicas, empleados, escuelas o referencias personales, para liberar información en su poder que pueda reflejar datos para su calificación y ser un estudiante de intercambio de PEACE.

No manejaré un vehículo motorizado durante mi estancia. No pediré aventón (cola) en la calle o subiré al carro de una persona intoxicada y al volante. No viajaré fuera de mi comunidad local, sin un chaperón adulto.

Llamaré a un consejero de PEACE representante del área, o al director del programa en caso de tener algún problema. No llevaré mis problemas al colegio o fuera de la casa.

Trataré de ajustarme a mi familia y comunidad lo mejor que pueda, esperando cosas diferentes a las que estoy acostumbrada (o). No esperaré que PEACE me cambie de familia a menos que el consejero falle en resolver los problemas entre la familia anfitriona y yo.

Como buen embajador de mi País trataré de aprender y practicar las tradiciones locales y también enseñar un poco de las mías a mis anfitriones.

Entiendo que PEACE prohíbe la visita de cualquier hombre /mujer, amigo o primo, y no puedo ir de visita a casa a mediados del año por cualquiera que sea la razón, excepto muerte de algún miembro de mi familia.

Estoy de acuerdo el contacto con otro estudiante de intercambio está limitado a cartas. Visitas o llamadas frecuentes están prohibidas. Contacto con padres es limitado a una llamada o un email / semana. Teléfonos celulares están prohibidos para usos personales.

Comprendo que mis anfitriones pagarán para mi habitación y comidas, pero debo pagar mis propias llamadas y demás gastos de visita y de diversiones. No prestaré ni daré prestado dinero a mi familia anfitriona ni a amigos.

Estoy de acuerdo en hacer un esfuerzo académico en todo momento, aunque ya me haya graduado y no necesite el crédito. Si recibo calificaciones negativas, se le notificará a mis papás de inmediato.

Comprendo que la familia podrá pedir que me vaya, debido a mi rompimiento de la confianza que ellos me tenían, la violación de reglas escolares, fallo académico, o por no hacer caso a las reglas del programa o leyes locales. También me podrían ser negadas ciertas libertades, actividades, viajes, ser requerido a dar servicios a la comunidad, multado y así también puedo ser enviado de vuelta a mi país inmediatamente, y a mi propio costo. El castigo depende de la desición que tome el Director del programa.

Estoy de acuerdo de prepararme para esta experiencia familiarizándome con la política, economía, religión, y estructura cultural de mi país; para poder mantener una conversación en el país extranjero, con diferente lenguaje; asistiendo a las orientaciones de PEACE.

Con el espíritu de un buen embajador, yo estoy de acuerdo en ayudar PEACE a promover la misión intercultural de intercambio, hablando con grupos de adultos y estudiantes durante mi estancia en mi país anfitrión.

If I am accepted as a participant in the P.E.A.C.E. Program I agree to obey the following rules and any other requirements as may be established and published by the program.

Since I will be residing in the home of another family not as a guest, but as a participating member, I agree to respect the parents in that home as my own, to follow their house rules, to participate in family customs, to keep my room clean and neat, to respect the personal property of all family members, and to share in family responsibilities and chores as are asked of me.

I will not use tobacco products, alcoholic beverages, or narcotic drugs; nor will I use foul or disrespectful language or engage in immorality, violent acts, or other illegal activities. I will honor my God, my country, and my family in all that I do or say. I have never been expelled from my school for any of the above. I authorize any government agency, medical facility, employer, school, or personal reference to release information held by them that would reflect on my qualification to be a student ambassador for P.E.A.C.E.

I will not drive any motorized vehicle for which an operator's license is required during my stay. Nor will I hitchhike or ride in any car with an intoxicated driver. I will not travel outside of my local community without an approved, adult chaperone.

I will call my P.E.A.C.E. counselor, area representative, or the program director with any problem that I have. I will not take my problems into my school or outside of my host family.

I will try my best to adjust to my host family and community, expecting many differences from what I am used to. I will not expect the program to move me, unless extensive counseling has failed to resolve serious problems with my host family.

As a good ambassador of my country I will try to learn and practice local customs and also teach my hosts some of mine.

I understand that P.E.A.C.E. prohibits visits from any boy/girl friends or cousins, and that I may not travel home in mid-year for any reason except death of a family member.

I agree that contact with other exchange students is limited to letters. Frequent phone calls or visit are forbidden. Contact with parents is limited to one phone call or one e-mail each week. Cell phones are prohibited at all times for personal use.

I am aware that my hosts pay for my room & meals, but I must pay all my own phone bills, clothing, & entertainment. I will not borrow or lend money with my host family or friends.

I agree to make my best academic effort at all times, even if I have graduated and don't need credit.

I understand that if a host family or school should ask me to leave due to my breaking family trust, violating school rules, academic failure, or disregarding program rules or local laws, I may be deprived of freedoms, activities, or field trips, required to perform community service, fined, and/or be dismissed from the program and sent home immediately at my own expense. The punishment shall be at the PEACE director's discretion.

I agree to prepare for this experience by familiarizing myself with the political, economic, religious, and cultural structure of my country; by acquiring a basic conversational facility in the host country's language; by attending P.E.A.C.E. orientations.

In the spirit of a good ambassador I agree to help P.E.A.C.E. promote the mission of intercultural exchange by speaking to student and adult groups during my stay in my host country.

SIGNATURE OF STUDENT
(firma de estudiante)

DATE
(fecha)



Letter of Greetings from Parents of

signatures (firmas)





PARENTAL AGREEMENT

(COMPROMISO DE LOS PADRES)

Nuestro (a) hijo (a) tiene nuestro permiso para solicitar y tomar parte del programa de Intercambio "P.E.A.C.E."

Entendemos que el programa está diseñado para incrementar el entendimiento entre distintos países del Mundo y no como medio para adquirir el manejo de un idioma extranjero. Si la escuela de anfitrión requiere dar clases privadas de inglés nosotros pagaremos todo cuesta.

Entendemos que las familias anfitrionas no recibirán compensación alguna por proveer habitación, alimento y por ofrecer su hogar y su vida familiar a nuestro hijo(a). Nosotros esperamos recibir a la familia anfitriona de nuestro hijo como huéspedes en nuestro hogar después del intercambio y así afianzar los lazos de amistad entre ambas familias.

Comprendemos que una comunicación muy frecuente del estudiante con sus amigos o familiares nada más hace que la tristeza del estudiante al no poder verles aumente y debilite su adaptación, así que aceptamos el límite de 2 llamadas telefónicas al mes. También estamos de acuerdo en no pedirle a nuestra (o) hija (o) que se regrese a casa o que nos alcance o vaya a ver a otro lugar lejos de su familia anfitriona durante su año escolar. Tampoco su familia anfitriona, hasta que su año haya acabado.

Entendemos que PEACE no puede garantizar que nuestro hijo(a) sea ubicado en un hogar con un(a) joven de su misma edad, sin hijos o con ambos padres. Aceptaremos una estructura familiar diferente como parte de la experiencia cultural.

Aceptamos que las reglas establecidas de la familia anfitriona pueden ser diferentes a las reglas con los que educamos a nuestros hijos, pero éstas reglas serán aceptadas de buena fe como propias; evitaremos interferencias y apoyaremos las decisiones de la familia.

Nosotros entendemos que normalmente las escuelas pasan por alto la matrícula y requisitos administrativos por demostrar una buena voluntad internacional, los créditos académicos y diplomas no podrán ser garantizados.

Nosotros entendemos que en caso de infracciones serias a las reglas de PEACE o leyes locales, excesiva tristeza, muy poca adaptación (personal, académico, o idiomático) o severos problemas mentales, podrá ser necesario, bajo la seria discreción de los miembros oficiales de PEACE, que nuestro(a) hijo(a) sea enviado de regreso antes de tiempo. Nosotros asumiremos todos los costos de ese regreso temprano y no se occasionará a PEACE daño alguno legal ni financiero.

Nosotros nos comprometemos por nuestro(a) hijo(a) a hacerle una revisión médica y dental como parte de esta aplicación. Nosotros nos comprometemos a sufragar gastos colaterales por accidentes o médicos que no estén cubiertos en la póliza de seguros de programa, más todos gastos dentales y exámenes físicos para el equipo deportivo.

Nosotros entendemos que PEACE no puede garantizar cuando pueden encontrar familias anfitrionas, no importa con qué anticipación actuemos, ya que las familias anfitrionas escogen al estudiante que ellas prefieran. Nosotros también entendemos que si perdemos otras oportunidades por esperar a una familia anfitriona lo hacemos a nuestro propio riesgo. Si decidimos retirar nuestra participación, nosotros nos comprometemos a mantener a PEACE y a sus agentes ileos; y no pediremos mas que el reembolso que nos corresponda según los términos de la Política de Pagos y Cancelaciones de PEACE.

Our son/daughter has our permission to apply for and take part in the (P.E.A.C.E.) Student Ambassador Program.

We understand that this program is designed to increase understanding among countries of the world and it is not to be used solely for the purpose of foreign language training. If the host school requires English tutoring we will pay all costs.

We understand that the host family will receive no compensation for providing room and board and for opening their home and family life to our son/daughter. We hope to welcome the host family as guests in our home following the exchange, in order to preserve stronger friendship ties among us.

We understand that frequent contact with family and friends heightens homesickness and weakens adaptation and so agree to limit phone calls to our son/daughter to 1 or 2 a month. We also agree not to ask him/her to come home or to meet us away from the host family at any time during the school year; nor will we visit him/her without an invitation from the host family until the end of his/her participation in the program.

We understand that P.E.A.C.E. cannot guarantee that our child will be placed in a home with a teenager of a like age or any children at all, or even with two parents. A different family structure will be accepted as part of the cultural experience.

We understand that the host family's rules and routine may be different than those which our children are accustomed to, but will be accepted by us in good faith as appropriate. We will avoid interference and try to be supportive of the host parents.

We understand that since host schools usually waive tuition and admission requirements in the interest of international good will, academic credit & graduation cannot be guaranteed.

We understand that in case of serious infraction of P.E.A.C.E. rules or local laws, prolonged homesickness, poor adjustment, (personally, academically, or linguistically) or severe health or mental problems, it may be necessary, at the sole discretion of P.E.A.C.E. officials, for our son/daughter to return early. We will assume all costs of such early return and will hold P.E.A.C.E. legally and financially harmless.

We agree for our son/daughter to have complete medical and dental examinations at our expense, as part of this application. We also agree to pay for any deductibles, co-payments, or incidental accident or medical expense incurred by our son/daughter that is not covered by the program's insurance policy, plus all dental expenses & physical exams for team sports

We understand that PEACE cannot guarantee how soon they will find a host family, regardless of how much time is allowed, since host families choose the student they want. We also agree that if we miss deadlines for other opportunities while waiting for a host family we do so at our own risk. If we decide to withdraw participation, we agree to hold PEACE and its agents harmless, and will ask for no more than a refund as per the terms of the PEACE Payments/ Cancellations Policy.

Public vs Private Schools, Host Expenses, Placement Locations

While the majority of students attend public (tuition-free) schools, some host family's teenagers attend private school and want an exchange student living in their home to attend the same one.

In other cases the public school has a quota, a deadline, a maximum or minimum age, denies students who graduated in their country, prefers graduated students, favors one organization, is overcrowded, is in a building renovation, is unsafe or unwelcoming, or your academic or English level is not high enough for them. *In such cases we may have to search for a private school.*

All U.S. exchange programs are regulated by the federal government and have a quota of J-1 visas they are limited to issue each year. By the time you apply, our organization's allocation may be used up, in which case if you don't want to wait for the next school term a nearby private school's I-20 will have to be used for an F-1 visa to attend there.

While some require students to be a practicing Christian or Catholic to be admitted, the main pre-requisite is that students be at least average or above academically, be of good moral character and behavior, be able to read, write, and speak English at least at an intermediate level, and have parents willing to pay tuition. This makes it easier and quicker to place YOU.

Tuition Fees at these schools average from \$2,000--\$4,000/semester. This cost is in addition to the Program Fees quoted by your International Representative. If you want your child to be considered for these schools, please indicate your preference below and the maximum tuition you are willing to pay. Before your child's placement is confirmed, we will contact you with the tuition & fees asked by the school, at which time you have the option of accepting or rejecting the private school or making a counter offer. Sometimes the program can negotiate a lower rate.

Do not consider my child's application for a Private School Program. We cannot afford it.

Do Consider my child for: Tuition range/ semester (1/2 year): (check one) \$1000 - \$1,500
 \$2,000 - \$3,500
 \$4,000 or more

\$ Maximum School Tuition Fee we are willing to pay *per semester* (in U.S. dollars).

Host Expense: Both public and private schools may also charge additional fees for books, uniforms, team sports and other extracurricular activities, etc. Public and private schools have cafeterias where students can buy lunch. Some bring it from home. Again, these costs vary from \$1.50-\$5.00. \$220 a semester is about average for a standard lunch plan without extras. Some families are not willing to host unless the student buys his/her own lunch.

Due to the cost of sending their own kids to private school, some families will not host unless they are compensated for all meals and even extra gas spent taking a student places or picking up from sports practices. \$150-400/month is the common range of hosting fees asked.

\$ Maximum Hosting Expense Fee we are willing to pay *per month* (in U.S. dollars).

Geographic Placement is now optional in or near *Pennsylvania vs. Nationwide* and affects the trip. Check or fill in all the appropriate lines below and fax to 570-277-0607 or email to your rep.

*Consider my child for nationwide placement. Consider only Pennsylvania or nearby.

*We are willing to pay \$300+ extra for airfare to attend the Spring trip. *Forfeit the trip.

AIRLINE TICKETING, TRAVEL, FINAL DEPARTURE PLAN

1. I understand that student tickets are electronic (there is no paper ticket to lose) but that travelers need to provide two forms of ID to board the aircraft, at least one of which contains a photo.

2. I understand that the PEACE flight itinerary is subject to printing errors and the airline's own schedule changes & cancellations. Therefore, I agree to call the airlines to confirm flight numbers, cities, times and dates before departure (both arriving in country and returning home).

3. I understand that tickets are purchased by PEACE at discounts subject to financial penalties for time or date changes and that this cost is a student's responsibility, except when necessary to extend a school term.

4 If I need to return by a specific date and fail to notify PEACE before they purchase my tickets, I will pay the change penalty.

Return Date Requested: _____ Reason: _____

5. I understand that PEACE "averages" costs regionally when pricing air travel as part of the contract; so if parents prefer a departure or return airport or airline more convenient than the one selected by PEACE that they are responsible for the difference in cost. Preferred airports are:

1 _____ 2 _____

6. I understand that airlines allow two pieces of luggage checked in storage plus one carry-on bag; and that they charge penalties for each extra bag and for bags too heavy or too large. I will call the airline in advance for terms and to obtain an estimate of costs.

7. I understand that once an itinerary has begun (the arrival half is flown) airlines will *not* change the return departure city for any reason.

8. I understand that if parents wish to visit students & then travel home together on the same aircraft, expecting no extra cost to their child's ticket, that they need to make their flight itinerary the same as the one already purchased for their child by PEACE. *Therefore, if parents wish to change their child's return departure city or airline, the parents must buy a new one way ticket for their child, solely at their own expense.*

9. I understand that the date on a J-visa application (plus 30 extra days "*grace*" granted by Customs & Immigration Service (CIS) for travel within the USA) is the latest that students may stay legally in the U.S. There is no paperwork to use the *grace* period. BUT, If I leave the U.S. to another country *during the grace period* I will not be left back in.

10. I understand that a J-visa cannot be renewed or converted for any reason; that students must return to their country, even if they have an I-20 for an F-1 visa to return here for college or a separate tourist visa.

11. I understand that medical insurance paid by PEACE *must* be extended at my expense if I wish to stay longer than my contracted term.

12. I understand that If I wish to stay longer than the term contracted for I must pay for the days of program service extended equal to the cost of service days in my original contract. (in addition to airline change fees)

13. I understand that the U.S. Government requires PEACE to know where students are at all times; therefore, students may not make or change arrival or return itineraries without the permission of PEACE.

14. PEACE must approve any side trips to visit relatives or friends in the United States (which may be taken ONLY while on my way out of the country) and needs letters from *both* natural & host parents stating names, relationship, date, address, email, house & cell phones of persons to visit and a similar email from that person also including a proof of legal residence. Such visits are prohibited during the school year.

ACUERDO DE BOLETAJE AEREO, PLAN DE VIAJE, Y REGRESO

1. Entiendo que los tiquetes estudiantiles son electrónicos (no hay documentos que puedan perderse) pero los viajeros deben facilitar dos formas de Identificación al abordar, al menos una de ellas debe tener una foto.

2. Entiendo que el itinerario de vuelos de PEACE, está sujeto a errores de impresión y a los cambios y cancelaciones de horarios de las aerolineas. Por lo tanto, acepto llamar a los aerolineas para confirmar todos los números de vuelos, ciudades, horas y fechas antes de partir (tanto para el ingreso a este país como para el regreso a casa.)

3. Entiendo que PEACE adquiere los tiquetes con descuentos sujetos a penalidades por cambios en las fechas y que este costo es responsabilidad del estudiante, con excepción para extender el período escolar.

4. Si necesito regresar para cierta fecha y no notifico a PEACE antes de la compra de los tiquete, tendre que pagar una multa.

Regreso: _____ Reazon: _____

5. Entiendo que PEACE promedia sus costos regionalmente cuando costea el viaje aéreo como parte del contrato; de manera que si padres prefiere un aeropuerto de salida más conveniente que el escogido por PEACE, la diferencia en el costo será pagadero por su cuenta. Aeropuerto preferencia 1 _____ 2 _____

6. Entiendo que las aerolineas autorizan dos piezas al registro de equipaje y un maletín de mano, y que cobran penalidades por cada maleta o equipaje demaciado pesado o grande. Yo llamaré anticipadamente a la aerolinea para terminos y estimativos en costos.

7. Entiendo que una vez que un itinerario ha comenzado (ya que la mitad del vuelo ha sido utilizado.), la aerolinea no cambiará la ciudad de partida de regreso por ningún motivo (solamente hoy)

8. Entiendo que sí los padres 9*.visitar a los estudiantes y desean viajar de regreso con ellos en el mismo avión con la idea de ningún costo extra al boleto de su hijo(a); ellos deben hacer el itinerario del vuelo igual que al ya adquirido para su hijo(a) por PEACE. por la razón anterior, si los Padres desean cambiar la ciudad de partida de regreso o aerolina deben comprar una boleto de una sola vía para su hijo(a) a sus expensas.

9. Entiendo que la fecha en la solicitud de la visa J-visa, es la fecha límite que un estudiante puede quedarse legalmente en los EUA (más 30 días de gracia garantizados por el "CIS" para viajar dentro de los EUA.) No hay documentación que podamos usar para este período de gracia, PERO, si parto de los EUA durante este período de gracia, no seré autorizado para entrar de nuevo.

10. Entiendo que una visa J no puede ser renovada ni convertido por ninguna razón, que los estudiantes deben regresar a su país, aun teniendo una I-20 para un visa F-1 para Universidad en EUA o una visa de turista.

11. Yo entiendo que el seguro médico pagado por la paz debe ser extendida a mi costa, si quiero permanecer más de mi período contratado.

12. Entiendo que si desea quedarse más tiempo que el contrato porque tiene que pagar por los días de servicio de programa amplio igual al coste de los días de servicio en mi contrato original.

13. Entiendo que el Gobierno de los EUA requiere PEACE saber donde los estudiantes están en todo momento, por lo que los estudiantes no pueden hacer o cambiar de llegada o retorno itinerarios sin la autorización de la PEACE.

14. PEACE debe aprobar cualquier viajes a visitar a familiares o amigos en los EUA (que sólo puede tomarse al mismo tiempo en mi salida del país) y las necesidades de las cartas de ambos padres de acogida natural y nombres indicando, relación, fecha, dirección, correo electrónico, casa y los teléfonos celulares de las personas a visitar y un correo electrónico similar de esa persona que también incluye una prueba de residencia legal. Visitas están prohibidas durante el año escolar.

Signatures of student & parents

Date

ProAmerican Educational And Cultural Exchange, Inc.

IMUNIZACION-SEGURO MÉDICO Y DE ACCIDENTES: CLAUSULAS y ACUERDOS. En cada parágrafo abajo marque sus iniciales y luego seleccione un plan



IMMUNIZATION & ACCIDENT-MEDICAL INSURANCE DISCLOSURE & AGREEMENT *Initial each paragraph and choose a plan below.*

Entiendo que las inmunizaciones recomendadas por la Asociación Americana de Pediatría son las requeridas para la *admisión en las escuelas de E.E.U.U.* Garantizo que todo lo solicitado en la planilla de aplicación de PEACE; que esté relacionado con el examen medico de mi hijo menor, sea administrado y fechado por el medico examinador. Entiendo que ello incluye, pero no limita, la aplicación de refuerzo de la vacuna M.R.R. y/o tétano en caso de que mi hijo no hubiese sido re-inmunizado en los últimos diez años.

Entiendo que debo firmar la "Autorización para trato de menor" que aparece en la tarjeta del seguro de mi hijo/a (que le llegará con sus papeles de viaje), porque los médicos Americanos y los hospitales no prestan el servicio médico necesario sin el permiso de los padres. Mi hijo/a entiende que en todos momentos deberá llevar consigo la tarjeta del seguro.

Entiendo que el seguro Médico y de Accidentes de PEACE, *no cubre* todos los gastos y que yo soy responsable por todo los gastos no cubiertos. He leído (o me han traducido) todas las exclusiones enunciadas en el folleto del Plan de Seguro Médico y de Accidentes.

Entiendo que el fútbol americano, el esquí, y otras actividades riesgosas no están aseguradas, y que yo asumiré el 100% de los gastos médicos si mi hijo/a es lesionado/a realizando actividades no-aseguradas. Si mi hijo/a participa en actividades no aseguradas por PEACE debe aplicar a seguros especiales ofrecidos a través de escuela a la cual asiste y localizada en el área de la familia anfitriona.

Entiendo que los exámenes físicos para deportes pueden costar desde \$50 hasta \$100 y no son cubiertos por el Seguro ya que no son para diagnósticos de lesión o enfermedad.

Entiendo que la limpieza dental de rutina, caries y ajustes de ortodoncia no están asegurados y pueden costaros y puede costar un mínimo de \$50 por visita. He sido aconsejado que mi hijo/a debe hacerse un chequeo dental y el tratamiento adecuado antes de dejar su país.

He sido aconsejado de proporcionar a mi hijo/a \$300 o más antes de viajar para posibles emergencias y/o solamente para pagos de exámenes físicos para deporte, deducibles del Seguro, y otros gastos médicos (medi-cinas por receta) que deben ser pagados primero por adelantado, aunque solamente pudieran ser reembolsados posteriormente por el Seguro.

He sido informado de que las visitas médicas tienen un costo de \$50 o más y la sala de emergencias en un hospital \$100 o más. Estos costos iniciales no forman parte del deducible de los seguros regulares. Entiendo que las medicinas que no requieren receta médica y los primeros auxilios para enfermedades o lesiones menores están siempre disponibles como alternativa al tratamiento de un medico o de un hospital.

Entiendo que una petición firmada por el estudiante es necesaria para reclamar el reembolso o autorizar el pago directo por cuidados médicos. (Las Planillas están disponibles para su impresión en la Pág. Web de PEACE.) Entiendo que la ley de HIPPA U.S. requiere autorización escrita del paciente (o padre si un menor) para que la compañía aseguradora o proveedor médico facilite información médica. Yo autorizo facilitar a los representantes o familias anfitrionas de PEACE los records médicos pertenecientes al tratamiento del estudiante mencionado, durante su tiempo como estudiante de intercambio.

Yo entiendo que los accidentes y el seguro médico es requerido por el gobierno Federal de los EE.UU. para todos los estudiantes de intercambio que deben cubrirse desde la llegada hasta la salida y que la cobertura mínima es definida por el Departamento de Estado de EE.UU.. Entiendo que si doy mi estancia tengo que comprar cobertura adicional por la PAZ para cualquier período de tiempo prolongado en los Estados Unidos.

INITIAL
↑↑↑↑

I understand that immunizations recommended by the American Pediatric Association are required for admission to all U.S. schools. I guarantee that during my child's PEACE medical exam all required by the chart on the PEACE application form will be administered and dated by the examining doctor. I understand that this includes, but is not limited to, a repeat vaccination for MMR and Tetanus if my child was not re-immunized within the last ten years.

I understand that I must sign an *Authorization for Treatment of a Minor* on my child's insurance card (that will arrive with his travel papers), because American doctors and hospitals will not render necessary medical treatment without parental permission. My son/ daughter understands to carry this card on his/her person at all times.

I understand that PEACE accident-medical insurance does NOT cover all expenses and that I am responsible for all non-covered charges. I have read or have had a translator read to me all exclusions listed in the accident-medical insurance plan brochure or on their website.

I understand that some hazardous activities (listed on the policy certificate) or website may not be insured, and that I am responsible for 100% of medical expenses if my son/ daughter is injured in non-insured activities. If my child participates in activities not insured by PEACE he/she will apply for special accident insurance offered through the host school.

I understand that school sports physicals may cost from \$50 to \$100 and are not insurable, since they are not for diagnosis of injury or illness.

I understand that routine dental cleanings, filling of cavities, and adjustment of braces are not insured and may cost a *minimum* of \$50-100 per incident. I have been advised to have preventive dental care administered in my country before student departure and will do so.

I have been advised to provide my child, upon arrival, with \$300 emergency funds to set aside and use only to pay for sports physicals, insurance deductibles, or medical costs (such as prescription drugs) that must be paid first in cash and only later reimbursed by insurance.

I have been advised that doctor visits cost at least \$50+ and hospital emergency rooms at least \$100+ and that this level of initial expenses may be a deductible not covered by standard insurance. I understand that over-the-counter medicine or first aid for minor illness or injury is a readily available, inexpensive alternative to treatment by a doctor or hospital.

I understand that a claim form signed by the student is needed to claim reimbursement or authorize direct payment for medical care (provided by PEACE and available for reprinting on their website). I understand that U.S. HIPPA law requires written authorization by the patient (or parent if a minor) for the insurance company or medical provider to release medical information. I/we so authorize release to any PEACE representative or host parent all medical records pertaining to treatment of the below named student during his/her time as an exchange student.

I understand that accident and medical insurance is required by the U.S. Federal government for all exchange students to be covered from arrival until departure and that minimum coverage is defined by the U.S. Department of State. I understand that if I extend my stay I must purchase additional coverage from PEACE for any extended time in the United States.

PRINT NAMES (NOMBRES)

PRINT NAME (NOMBRE)

SIGNATURES OF BOTH PARENTS (firma de ambos padres) (fecha)

SIGNATURE OF STUDENT (firma de estudiante) DATE

ACADEMIC AGREEMENT and RELEASE OF RECORDS

I agree to make my best academic effort at all times, even if I have graduated and don't need credit. I will never brag that I am on vacation.

I also agree to try new extracurricular activities in order to broaden my experiences, to increase my exposure to the local student body for their benefit and to increase my prospects of making new friends who share a common interest with me.

I agree to prepare for this experience by familiarizing myself with the political, economic, religious, and cultural structure of my country. In the spirit of a good ambassador I also agree to help P.E.A.C.E. promote the mission of intercultural exchange by speaking to student and adult groups during my stay in my host country.

I understand that a J-1 visa is an official government program of cultural exchange, and as such is not to be used primarily for learning English or university scholarships.

I understand that individual schools vary in their expectations and even demands of English proficiency upon my arrival. Misrepresentation of my proficiency and/or failure to make sufficient progress may cause me to be refused admission or to be required to pay for ESL classes or private tutoring until a satisfactory level is reached.

I understand that if my initial home country evaluation does not show a basic level of listening and reading English comprehension, I will be required to take private lessons before departure, as a condition of my being accepted into the program, understanding that a lack of sufficient progress may result in a delay or even my denial to travel.

I understand that PEACE cannot guarantee any student eligibility to participate in interscholastic sports competition between rival schools because rules vary by state according to age, graduation status, years of school completed, previous activity in the desired sport, and school or program listing in various associations.

I understand that PEACE cannot guarantee that any student will be able to play their favorite sport because (1) schools vary greatly in size, and therefore, do not offer the same sports from one to another; (2) team sizes are restricted and may require tryouts to determine minimal skills.

I understand that PEACE cannot guarantee that any student will be able to attend their desired academic classes because (1) schools vary in size, and therefore, do not offer the same courses from one to another and (2) class sizes are restricted, so, some offered classes may be full.

I understand that PEACE cannot guarantee graduation diplomas to foreign exchange students who pass the otherwise requisites, because requirements vary by states and their various school districts. Schools are not required to give credit for work earned in another country, nor can they always rectify the differences in each curriculum.

I understand that if I need credits transferred to my home school I will attach to this application a written request in English, signed by my principal, indicating to the host school what classes I need for credit to graduate at home. Or, if I seek to graduate while abroad I will attach my last two years transcripts with an explanation of the depth of material covered in each, provided by my school, translated into English.

I understand that for exchange students already graduated in their own country, while a few schools may give honorary diplomas, certificates of attendance are the most common form of recognition, even if participation in the cap & gown graduation ceremony is allowed. If graduated, I will not seek a diploma.

I understand that public schools are not required to accept exchange students and that federal law prohibits bringing students without school acceptance. Therefore, my arrival could be delayed until acceptance or I may have to be placed in a new host & school.

I understand that public schools may not be available and that private schools have no tax support and, therefore, may require full or at least partial tuition and/or fees for admission and that PEACE program fees are not budgeted to include these costs. I can afford a maximum of []\$1500 []\$3000 []\$4500 []\$6000 []\$7500 for the year.

I understand that personal contact with other exchange students should be limited to incidental association via school activities, and that I will not talk in my native language in school except in a language class.

I understand that while popular fashion is desired to fit in with students, PEACE forbids extreme styles. Males: no ponytails, long hair, beards, moustaches, earrings. Girls: may not wear provocative (too short or too tight or low cut) clothing. Neither may have tattoos or body, face, or tongue piercing nor wear ghetto-culture clothing, nor cloths displaying immoral, vulgar, or insulting sayings.

I promise not to gossip to school friends about problems within the host home while living there and afterwards, if relocated. I will first speak to my PEACE counselor and not initially involve schoolteachers or counselors unless it is a school related problem or if I have not received adequate help and support from my program.

I release to PEACE all records from my host school pertaining to my tenure there and understand that if a school reports me as being academically deficient or in violation of rules of conduct, I will be deprived of extracurricular activities or sports practices, and may even be suspended, at the school administration's discretion. I also understand that I may be subject to additional punishment by my host family and/or PEACE.

I have never been expelled from any school for any reason of conduct. I understand that if a host school should expel me due to my violating laws, school rules of conduct, or academic failure, I will be dismissed from the program and sent home immediately at my own expense.

Acuerdo hacer mi mejor esfuerzo académico siempre, aunque he graduado y no necesito crédito. Nunca me jactaré que estoy las vacaciones.

También acuerdo intentar nuevos actividades extracurriculares para broaden mis experiencias, para aumentar mi exposición al cuerpo local del estudiante para su ventaja y para aumentar mis perspectivas de hacer a los nuevos amigos que comparten un interés común con mí.

Acuerdo prepararme para esta experiencia familiarizándose con la estructura política, económica, religiosa, y cultural de mi país. En el alcohol de un buen embajador también acuerdo ayudar a P.E.A.C.E. para promover la misión del intercambio intercultural hablando a los grupos del estudiante y del adulto durante mi estancia en mi país de anfitrión.

Entiendo que esta es un programa oficial del gobierno del intercambio cultural, y pues tal no debe ser utilizada sobre para el inglés que aprende.

Entiendo que las escuelas individuales varían en sus expectativas e incluso demandas de la habilidad inglesa sobre mi llegada. La mala representación de mi habilidad y/o falta de hacer suficiente progreso se puede hacerme ser admisión rechazada o requerir para pagar clases de ESL o curso particular privado hasta que se alcanza un nivel satisfactorio.

Entiendo que si mi evaluación inicial del país de origen no demuestra un nivel básico de la comprensión que escucha y de lectura inglesa, me requerirán tomar lecciones privadas antes de salida, como condición de mi que es aceptado en el programa, con entender que una carencia del suficiente progreso puede dar lugar a retraso o aún mi negación para viajar.

Entiendo que la PAZ no puede garantizar ninguna elegibilidad del estudiante para participar en los deportes interscholastic competición entre las escuelas rivales porque las reglas varían por el estado según la edad, estado de la graduación, años de graduación, anterior de la escuela en el deporte deseado, y del listado de la escuela o programa en varias asociaciones.

Entiendo que la PAZ no puede garantizar que cualquier estudiante podrá jugar su deporte preferido porque las escuelas (de 1) varían grandemente de tamaño, y por lo tanto, no ofrece los mismos deportes a partir del uno a otro; (2) tamaños del equipo son restrictos y pueden requerir tryouts determinar habilidades mínimas.

Entiendo que la PAZ no puede garantizar que cualquier estudiante podrá asistir a sus clases académicas deseadas porque las escuelas (de 1) varían de tamaño, y por lo tanto, no ofrece los mismos cursos a partir del uno a otro y clase (de 2) que los tamaños son restrictos, así pues, algunas clases ofrecidas pueden ser llenos.

Entiendo que la PAZ no puede garantizar los diplomas de la graduación a los estudiantes de la moneda extranjera que pasan las clases de otra manera indispensables, porque los requisitos varían por el estado y por sus varios distritos de la escuela. Las escuelas del anfitrión no se requieren para dar el crédito para el trabajo ganado en otro país, ni pueden rectificar siempre las diferencias en cada plan de estudios.

Entiendo que si necesito los créditos transferidos a mi escuela casera que uniré a este uso una petición escrita en inglés, firmado por mi principal, indicando a la escuela del anfitrión qué clases necesito para que el crédito gradúe en el país. O, si intento graduar mientras que al exterior uniré los mis dos años pasados de transcripciones con una explicación de la profundidad del material cubierta en cada uno, con tal que por mi escuela, traducida a inglés.

Entiendo que para los estudiantes de intercambio graduó ya en su propio país, mientras que algunas escuelas pueden dar los diplomas honorarios, los certificados de la atención son los más comunes, aunque participación en el casquillo y se permite la ceremonia de graduación del vestido. Si está graduado, no buscaré un diploma.

Entiendo que las escuelas públicas no están requeridas para aceptar a estudiantes de intercambio y que la ley federal prohíbe el traer de estudiantes sin la aceptación de la escuela, así que mi llegada podría ser retrasada hasta que se asegura la aceptación.

Entiendo que las escuelas privadas no tienen ninguna ayuda del impuesto y, por lo tanto, pueden requerir por completo o por lo menos cuota parcial y/o los honorarios para la admisión y que los honorarios del programa de la PAZ no estén presupuestados para incluir estos costes.. I can afford a maximum of []\$1500 []\$3000 []\$4500 []\$6000 []\$7500

Entiendo que el contacto personal con otros estudiantes de intercambio se debe limitar a la asociación fortuita vía actividades de la escuela, y que no hablaré en mi lengua materna en escuela excepto adentro una clase de la lengua.

Entiendo que mientras que la manera popular se desea para caber adentro con los estudiantes, la PAZ prohíbe estilos extremos. Varones: ningunos ponytails, pelo largo, barbas, bigotes, pendientes. Muchachas: no puede usar la ropa (demasiado corta o demasiado apretada) provocativa. Ni puede tener tatuajes o perforaciones del cuerpo ni usar la ropa de la ghetto-cultura, ni lospaños exhibir refranes inmorales, vulgares, o insultante.

Prometo no a los chismes de amigos de la escuela acerca de los problemas dentro de la casa de acogida mientras vivía allí y después, si reubicados. En primer lugar, hablaré con mi asesor de paz y no implican un principio los maestros o consejeros a menos que sea un problema relacionado con la escuela o si no han recibido ayuda y el apoyo de mi programa.

Libero a la PAZ todos los registros de mi centro de acogida referente a mi permanencia allí y entiendo que si una escuela me divulga como siendo académico deficiente o en la violación de reglas de la conducta, yo seré privado de actividades extracurriculares o me divertiré prácticas, y puedo incluso ser suspendido, por el descreimiento de la administración de la escuela. También entiendo eso Puedo estar conforme al castigo adicional por mi familia y/o PAZ del anfitrión.

Me nunca no han expelido de ninguna escuela por ninguna razón de la conducta. Entiendo que si una escuela del anfitrión me expelle debido a mis leyes de la violación, a las reglas de la escuela de la conducta, o a la falta académica, yo seré despedido del programa y del hogar enviado inmediatamente en mi propio costo.

date (fecha) signature of student (estudiante) signature of parent (padre)

P.E.A.C.E. PLACEMENT POLICY	Check all appropriate []. Fill in all ___ that you agree to before signing
<p>PROGRAM: Placement Fee quoted \$ _____ Check Term applied for: <input type="checkbox"/> Academic Year (AY), <input type="checkbox"/> Fall Semester, <input type="checkbox"/> Spring Semester, <input type="checkbox"/> Partial Semester, <input type="checkbox"/> Partial Year (SS+), <input type="checkbox"/> Calendar Year (CY), <input type="checkbox"/> U.S. Winter <input type="checkbox"/> U.S. Summer <input type="checkbox"/> for on-time guarantee will pay AY vs CY rate diff. +agree to nationwide placement.</p> <p>TARGET TRAVEL DATES (TTD): (estimated, not guaranteed) <input type="checkbox"/> Fall Semester or Academic Yr: Aug 15; <input type="checkbox"/> Winter Term & Partial year: Dec 15 <input type="checkbox"/> Spring Semester or Calendar Year: Jan 15 <input type="checkbox"/> U.S. Summer: July 1st</p> <p>REGISTRATION DEADLINES <u>Only Timely Applicants</u> (accepted and 50% paid six months prior to "TTD" above) are guaranteed placed on time, unless additional fees and/or nationwide search is agreed to. <u>Late applicants</u> are not guaranteed placement on time, but if placed late will be granted extra days up to July 31; or may be deferred to the next school term.</p>	<p>FECHAS DE INSCRIPCION Marcar su escogencia []</p> <p>FECHAS FIJADAS para VIAJAR: <input type="checkbox"/> Agosto 15 = Semestre de Otoño o Año Escolar; <input type="checkbox"/> Dic 15 = Invierno; <input type="checkbox"/> Enero 15 = Sem.de Primavera o Año Escolar; <input type="checkbox"/> Julio 1 = Verano e/ EU. Sólo a los Aspirantes a Tiempo (son aceptados y han pagado el 50% seis m. antes de la Fecha Fijada para Viajar) se les garantiza su colocación a tiempo. A los Aspirantes Tardíos no se les garantiza su colocación a tiempo, pero si viajan tarde, se les extiende su estadía hasta Julio 31; o se difieren al siguiente Período</p>
<p>PROGRAM COSTS</p> <ol style="list-style-type: none"> APPLICATION FEE: An additional 5% of the PLACEMENT FEE is to be paid in local currency. 2.5% is due initially for the cost of applications, advertising, language testing, personal interviews, int'l. phone calls, express mail, etc. and 2.5% is due at the time of departure orientation. These fees are non-refundable. PLACEMENT FEE: Upon passing language tests, interviews, completing a full application, receiving acceptance notice and signing final terms APPLICANT must pay 50% of the Placement Fee immediately to the PEACE home office and the remaining 50% upon notice of placement with a host family and school. CANCELLATION FEE: \$100 is charged for refunding placement fees sent to PEACE prematurely before an application was reviewed, that is later rejected, OR if accepted applicant is later found to have low English when orally tested. AIR TICKETS <input type="checkbox"/> included <input type="checkbox"/> not included in price above (refer to Fact Sheet); but none will be purchased until 100% of program fees are received by PEACE. *Fuel surcharges may be added if airlines raise prices after program prices are set. *Airlines charge penalties for excess and overweight luggage when checking in.*Airlines charge at least \$250 for each date change except in emergencies. CHANGE FEES: To extend an ongoing program beyond the term they paid for applicant must pay \$10/day for continued insurance and program support service. *To extend to a 2nd semester applicant must pay the difference in program fees. *To change a visa from B-2 to J-1 or J-1 to F-1 will result in new U.S. Visa Fees, *To reapplying to be interviewed, if turned down for a visa, will cause a new fee. 	<p>COSTOS Y MÉTODOS DE PAGO Marcar según el caso []</p> <ol style="list-style-type: none"> COSTOS DE INSCRIPCION: El equivalente al 5% del Costo del Programa BASE será pagado a su Representante local en moneda local. La mitad se pagará al momento de la Inscripción, para gastos de papelería, propaganda, examen, entre-vistas, traslados, llamadas telefónicas, correo expreso, etc. La segunda mitad se pagará al momento de la Orientación de Salida. COSTO TOTAL del PROGRAMA: \$ _____ Marcar según el caso <input type="checkbox"/> Año Sep-Jun; <input type="checkbox"/> Semestre Sep-Ene; <input type="checkbox"/> Semestre Ene-Jun; <input type="checkbox"/> Sem. Dec-Jul; <input type="checkbox"/> Año Caledario Ene-Nov; <input type="checkbox"/> o Cal. Ene-Ene; <input type="checkbox"/> Invierno <input type="checkbox"/> Verano en EUA. Verificar costos en www.peace-inc.org/apps.htm. COSTOS AGREGADOS: \$100 cargaron para la extensión de un programa en curso o dinero el consolidar pagado prematuramente en un uso que se rechaza o si encuentran a un aspirante aceptado para tener bajo inglés cuando está probado oral. Un cambio del estado de visa dará lugar a los E.U. nuevos Honorarios del visa.. Tras pasar exámenes de idiomas, entrevistas, realización de una plena aplicación, la recepción de la notificación de aceptación y de acuerdo a condiciones finales solicitante debe pagar el 50% de la Cuota de colocación de inmediato Los cheques deberán ser emitidos a "PEACE, Inc." en US Dólares. Todos los cheques deberán ser codificados magnéticamente con el número de ABA, para que nuestro banco pueda recibir los fondos. Los cheques devueltos por falta de fondos deben ser reemplazados por "cheque certificado" más \$50 de penalidad. Para enviar dinero banco-a-banco, envíelo a "ProAmerican Educational And Cultural Exchange, Inc., c/o Sovereign Bank, Pottsville PA 17901. Operating Acct. #8181013204, ABA: 231372691." Instruir a su banco para que evíe la transferencia por medio de su banco correspondiente en New York y NO directamente al Sovereign Bank, pues este NO ES un banco internacional. Envíe, vía FAX-570.277.0607 o email: paz@peace-inc.org copia de la orden de transferencia c/ nombre del estudiante beneficiado. Así sabremos a quien acreditar su pago y podremos hacer seguimiento a su envío. *El Aplicante es responsable por cargos a PEACE ocasionados por manejo de los pagos con tarjeta de crédito. (3-6%) BOLETOS AEREOS serán <input type="checkbox"/> totalmente, <input type="checkbox"/> parcialmente, o <input type="checkbox"/> no pagados por PEACE; pero no se comprará el boleto hasta no haber recibido el 100% del costo del programa en las oficinas de PEACE EU. Las sobrecargas del combustible pueden también ser impuestas si los precios del aumento de las líneas aéreas sobre nuestro presupuesto después de precios del programa se establecen. Penalidades de \$150-250 por cambio de fecha en su pasaje excepto emergencias una vez que el boleto ha sido pagado y por exceso de equipaje o de peso.
<p>PAYMENT TERMS AND DEADLINES</p> <ol style="list-style-type: none"> If you need to make Partial Payments, PEACE will not begin searching for a host family until the initial 50% of the Placement Fee is received in the U.S. The balance due above 50% may be paid directly to the U.S. office or held in ESCROW by your local PEACE agent until you receive notice of placement; but 100% of all fees must be received in the home office no later than 30 days prior to the appropriate Program Target Travel Date (Aug.15, Dec 15 , Jan 15 or July 1), even if placement has not yet been made, in order to avoid further delay. PEACE will not release host family and school details, or air tickets until 100% of fees due and proof of all required immunizations, authorization for treatment of a minor, medical exam and history, academic records, and language test are received at U.S. Headquarters. If not paid promptly your host family may be released to another student and your visa canceled. 	<p>TÉRMINOS DE PAGO Y FECHAS ESTABLECIDAS</p> <ol style="list-style-type: none"> Si Ud. desea hacer pagos parciales, PEACE no comenzará a buscar familia anfitriona hasta que el 50% del Costo del Programa sea recibido en los EU. El saldo superior al 50% podría ser pagado directamente a los EU, o podría ser retenido por el representante local hasta que reciba noticia de la colocación; pero el 100% de la cuota deberá estar cancelado 30 días antes de la fecha de salida fijada para su viaje a E.U. de Agosto 15(AY), Dic 15(PY), Enero 15(SS) o Julio 1(SP) aún si no has sido colocado, para evitar retrasos. PEACE no enviará detalles sobre la familia, planilla para la visa o el boleto de avión; sin haber recibido en la oficina de EU la cancelación total (100%) del costo del Programa. De no pagar a tiempo, la familia anfitriona se le ofrecería a otro estudiante y su visa cacelado.
<p>METHODS OF PAYMENT</p> <ol style="list-style-type: none"> CHECKS must be made payable to "PEACE, Inc." in U.S. DOLLARS. All checks <i>must</i> be magnetically encoded with an ABA routing number to enable our bank to collect funds from your bank. Checks returned for insufficient funds must be replaced with "bank certified funds" plus a \$50 penalty. To WIRE money bank-to-bank, send it to "ProAmerican Educational And Cultural Exchange, Inc., c/o Sovereign Bank, Pottsville PA 17901 in P.E.A.C.E. Operating Acct #8181013204, ABA: 231372691". Instruct your bank to wire <i>via</i> its own correspondent bank in New York, and not to Sovereign Bank directly because it is not an international bank. Identify full name of student being paid for or we won't know who to credit; fax a copy of the wire order to 570-277-0607 or email to paz@peace-inc.org so we can anticipate its receipt by our bank. 	<p>Signature of parents and student: _____ Date: _____</p>

P.E.A.C.E. FINANCIAL TERMS:

3. CREDIT CARDS: Applicant is responsible for credit card company's merchant fees of 3-5% when paying by credit card. PEACE accepts MC & VISA via PayPal.

RECEIPTS

A local representative of PEACE must give a receipt for all local check or cash payments. Never give payment to a local office or representative without obtaining a receipt from them. No receipt will come from the U.S. home office until monies are received there.

CANCELLATIONS

- a. APPLICATION & ORIENTATION FEES are non-refundable, whether the student passes or fails the initial interview, testing, & application review or after having pre-departure orientation.
- b. During contracted time to search for host family, all applicants (on time or untimely) who
 - a) CANCEL after written acceptance by PEACE & applicant, but *before host family placement* is made forfeit a \$500 PENALTY.
 - b) CANCEL after PEACE has given email or fax notice of securing a host family, but the school is still pending, will forfeit \$1500.
 - c) CANCEL after school enrollment notice forfeit \$2500; except if cancellation due to student failure to qualify for a visa, penalty is reduced to \$1000. This penalty can be avoided if the applicant successfully appeals and qualifies for a visa later, even if having to go to the next semester or school year. Applicant is responsible to learn local visa qualifications and interview at the U.S. Consulate to determine visa eligibility status upon acceptance into a program to avoid being in this predicament.

REFUNDS

1. No fee reimbursements will be made to students sent home for bad attitude or behavior, academic failure, violations of program rules or laws, lying, or falsifying information at any time during the program. Nor will fees be reimbursed for voluntary early return due to health, homesickness, dissatisfaction with host family, school, program rep, or personal reasons. Airline change penalties are always the student's responsibility. In any discrepancy, interpretations of program documents & rules are made exclusively by the PEACE directors.
2. **Timely Applicants** options are to cancel for 100% refund of their Placement Fee (less bank fees if wire requested) or re-contract a new placement deadline and get a Late Arrival Refund of \$10 for each day PEACE gives placement notice later than TTD.
3. **Late Applicants** (applying less than six months before the TTD (target travel date) are only eligible for a late arrival refund of \$10 per day if placement notice is late by the below schedule:
 - applied 150-180 days prior to TTD only if placed 15+ days late
 - applied 120-149 days prior to TTD only if placed 30+ days late
 - applied 90-119 days prior to TTD only if placed 45+ days late
 - applied 60 - 89 days prior to TTD only if placed 60+ days late
 - applied within 60 days of the TTD do not qualify for any late placement refund, but their return date may be extended .
4. Failure to notify the PEACE US office by fax or e-mail of intent to cancel by 9pm EST the next business day after the target travel date, will result in an automatic 30 day extension for PEACE to make a placement whether the original application was timely or untimely.
5. All applicants are eligible to re-contract for the next school semester or school year with no increase in program fees otherwise applicable to new applicants.

All discrepancies of contract translations will favor the English version. Extra promises or claims by local representatives are invalid and non-binding. Todo discrepancias de las traducciones de contratos favorecerán la versión de Ingles. Extra promesas o las reclamos por representantes local son invalido.

Signature of parents and student: _____ Date: _____