

Attach Photo
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**Michigan 4-H International Exchange
In Collaboration with the Oregon 4-H Youth
Development Program**

Youth Participation Application

I.D. No.: _____

Approved: _____

(For office use only)

County: _____

Passport # _____

Place of Issue _____

Date of Issue _____

Please check the program/s you are applying for:

Poland

4-H International Exchanges are conducted in support of the 4-H program of the Cooperative Extension Service. If you are a 4-H Member, this application form must be submitted to the International Program Coordinator in your state. Contact your county Extension or State 4-H office for additional program information. **Follow instructions carefully. Please give complete information.**

Print Neatly or Type

Full Name: _____ (as listed on passport)
(First) (Middle) (Last)

Nickname: _____ Gender: Male Female
(Name you would like to be called)

Home Address:

Street/Route: _____

City: _____ State: _____ Zip: _____

Phone:(____)_____ E-mail: _____

Emergency Contact Name: _____ Phone: (____)_____

Relationship to you: _____

Parents/Guardians:

Mother's Name: _____

Street Address/Route: _____

City: _____ State: _____ Zip: _____

Phone:(____)_____

Father's Name: _____

Street Address/Route: _____

City: _____ State: _____ Zip: _____

Phone:(____)_____

Religion (for information of host family, if Protestant, give denomination): _____

HEALTH/INSURANCE

Do you have any allergies, dietary needs or other health problems? Yes No

If yes, please explain: _____

Name of family insurance carrier: _____ I.D. _____

EDUCATION, TRAINING, AND TRAVEL EXPERIENCE

Year of schooling you will complete by the date you are available for participation:

High School: 9-Freshman 10-Sophomore 11-Junior 12-Senior

College/Univ.: Freshman Sophomore Junior Beyond Bachelor's Degree

LANGUAGE ABILITY (other than English)

Please indicate: Excellent, Good, Fair, Poor, or None

Language	Reading	Writing	Speaking	Verbal Comprehension	Years Studied in High School /College	Spoken in the Home (Yes/No)

Are you willing to study a language? Yes No

TRAVEL EXPERIENCE OUTSIDE OF THE UNITED STATES

Country	Length of Stay	Dates/Year	Purpose (Tourist, Exchange Student, Other)	Name of Exchange Program if Applicable

Organization, Leadership, and Related Experiences (Include experiences in 4-H, church, school university, community other)

Organization/Activity	Years of membership	Leadership/Other Responsibilities

What are your long-range career goals? _____

What are your long-range personal goals? _____

Why do you want to participate in an international exchange program? _____

Please explain briefly your interests or other pertinent information about yourself and how you feel a 4-H International Exchange Program will benefit you. _____

In the following activities, check as many boxes as apply to you:

What activities do you enjoy?

- | | | | | | |
|--------------------------------------|-----------------------------------|--------------------------------------|------------------------------------|---------------------------------|--|
| <input type="checkbox"/> reading | <input type="checkbox"/> shopping | <input type="checkbox"/> walking | <input type="checkbox"/> camping | <input type="checkbox"/> biking | <input type="checkbox"/> skateboarding |
| <input type="checkbox"/> swimming | <input type="checkbox"/> singing | <input type="checkbox"/> cooking | <input type="checkbox"/> music | <input type="checkbox"/> sports | <input type="checkbox"/> museums |
| <input type="checkbox"/> video games | <input type="checkbox"/> movies | <input type="checkbox"/> photography | <input type="checkbox"/> computers | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

Your personality characteristics:

- | | | | | | |
|-----------------------------------|--------------------------------------|-----------------------------------|------------------------------------|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> neat | <input type="checkbox"/> curious | <input type="checkbox"/> shy | <input type="checkbox"/> emotional | <input type="checkbox"/> cheerful | <input type="checkbox"/> quiet |
| <input type="checkbox"/> patient | <input type="checkbox"/> talkative | <input type="checkbox"/> sociable | <input type="checkbox"/> tolerant | <input type="checkbox"/> serious | <input type="checkbox"/> laugh a lot |
| <input type="checkbox"/> outgoing | <input type="checkbox"/> responsible | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | | |

What type of TV programs do you enjoy watching?

- | | | | | | |
|---------------------------------|------------------------------------|-----------------------------------|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> movies | <input type="checkbox"/> adventure | <input type="checkbox"/> musicals | <input type="checkbox"/> drama | <input type="checkbox"/> comedies | <input type="checkbox"/> educational |
| <input type="checkbox"/> sports | <input type="checkbox"/> news | <input type="checkbox"/> none | <input type="checkbox"/> game shows | <input type="checkbox"/> reality shows | <input type="checkbox"/> _____ |

What type of books or other do you like to read?

- | | | | | | |
|-----------------------------------|------------------------------------|---------------------------------|------------------------------------|--------------------------------------|--|
| <input type="checkbox"/> classics | <input type="checkbox"/> mysteries | <input type="checkbox"/> poetry | <input type="checkbox"/> textbooks | <input type="checkbox"/> non-fiction | <input type="checkbox"/> science fiction |
| <input type="checkbox"/> travel | <input type="checkbox"/> none | <input type="checkbox"/> novels | <input type="checkbox"/> comics | <input type="checkbox"/> magazines | <input type="checkbox"/> other _____ |

What type of music do you enjoy?

- | | | | | | |
|------------------------------------|----------------------------------|----------------------------------|---|--------------------------------|-------------------------------------|
| <input type="checkbox"/> classical | <input type="checkbox"/> disco | <input type="checkbox"/> popular | <input type="checkbox"/> alternative rock | <input type="checkbox"/> jazz | <input type="checkbox"/> show tunes |
| <input type="checkbox"/> rock | <input type="checkbox"/> country | <input type="checkbox"/> techno | <input type="checkbox"/> rap | <input type="checkbox"/> salsa | <input type="checkbox"/> _____ |

What qualities do you value most in other people?

- | | | | | | |
|---------------------------------------|---|--------------------------------------|----------------------------------|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> loyalty | <input type="checkbox"/> kindness | <input type="checkbox"/> patience | <input type="checkbox"/> honesty | <input type="checkbox"/> politeness | <input type="checkbox"/> intelligence |
| <input type="checkbox"/> decisiveness | <input type="checkbox"/> sense of humor | <input type="checkbox"/> responsible | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

HOST FAMILY INFORMATION:

My family has hosted an international participant before: ____ Yes ____ No

Name of participant: _____ Name of Program: _____ Year: _____

Name of participant: _____ Name of Program: _____ Year: _____

I request to be hosted by: _____

(Host family name)

Address: _____

_____ Phone: () _____

Any host family assigned by Exchange Coordinator will be acceptable: ____ Yes ____ No

4-H Project skills you can share with others in the country you will be visiting.

Project	Skills you can demonstrate

Earliest date that you can depart: _____

Will you be able to host this year? ____ Yes ____ No ____ Maybe

Will you be able to host next year? ____ Yes ____ No ____ Maybe

General Information

Other information helpful in your placement with a program (include medical considerations and special interests)

References: 4-H members are required to name at least one Extension Staff member; the other two may be any individual other than relatives.

Reference Name: _____ Phone: () _____

Reference Name: _____ Phone: () _____

Reference Name: _____ Phone: () _____

Fee

You will be asked to submit a deposit with application to the 4-H International Program that you apply for.

I CERTIFY that all the information on this application is true and complete to the best of my knowledge. I understand the purpose and objectives of 4-H International Exchange programs and agree to participate within the framework of the program for which I am accepted.

Applicant's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

4-H County Staff Signature: _____ Date: _____

State 4-H Specialist Signature: _____ Date: _____