

 State <input type="text"/> County <input type="text"/>	<p align="center"><b>IFYE PARTICIPANT APPLICATION</b></p> <p align="center"><i>For further information on the IFYE program, see FAQ and IFYE Brochure (<a href="http://ifyeusa.org/exchange">http://ifyeusa.org/exchange</a>)</i></p>	<p align="center"><i>Please attach a head and shoulders photo</i></p> <p>- If submitting application by email, photo will be 2nd attachment.          - If submitting application online as fillable form, it will be second attachment on submission.</p>
	<p align="center">Save and Submit ONLINE or Email to: <a href="mailto:alanelambert@ifyeusa.org">alanelambert@ifyeusa.org</a></p>	

**Program for which applying:** IFYE Representative (19 years and over): ☐ 6 months ☐ 3 months

**Please print/type. Use additional room/page at end of application, if more space is needed**

**PERSONAL DATA:** Are you a USA Citizen? YES ☐ NO ☐

Full Name (First) (Middle) (Last) (As it appears on your government ID) Sex (M/F):

**Preferred First Name**

**Age:**

**Birthdate:**

**Permanent Address:**

Street:

City/State: Zip

Area Code/Phone:

Cell:

Fax: (if applicable):

Email address:

**Current Address: (If different)**

Street:

City/State: Zip

Area Code/Phone:

Last date at this address:

*Month/Day/Year*

**Emergency Contact:**

**Phones: (H)**

**(C)**

**Relationship:**

**(W)**

**Family Information:**

Father's Name:

Occupation:

Street:

City/State: Zip

Phones: (H)

(C)

(W)

Fax: (if applicable):

Email address:

Mother's Name:

Occupation:

Street:

City/State: Zip

Phones: (H)

(C)

(W)

Fax: (if applicable):

Email address:

**Siblings:**

Number of Brothers:

Age(s) of Brother(s):

Number of Sisters:

Age(s) of Sister(s)

**EDUCATION:** Indicate the highest year you will have completed by the date you will be available for participation.

**Secondary:** List highest grade completed  and date of completion  (mm/yyyy)

**Post-Secondary:**

Name of School	Last Date attended	Degree(s) Received	Date(s) Received

**Work experience:** Currently working? Explain (You may use additional pages at end of this form:)

**LANGUAGE ABILITY:**

(Other than English) Please indicate: Excellent - Good - Fair - Poor - None

Language	Reading	Writing	Speaking	Comprehension	Years Study	Spoken at Home

Are you willing to study a language? ☐ Yes ☐ No

**TRAVEL EXPERIENCE OUTSIDE THE U.S.:**

Country(ies)	Length of Stay	Dates	Purpose ( <i>tourist, exchange student, other</i> )

**HOST FAMILY INFORMATION:** Has your family hosted an international participant before?

Yes ☐ No ☐

Country:	Name of Program:	Year:

Other international activities in which you and your family have been involved (i.e. Cultural Night)

**LEADERSHIP & RELATED EXPERIENCES:** *(include your experiences in 4-H, church, school, university, other)*

Organization	Years of Membership	Leadership/Other Responsibilities

**INTERNATIONAL OPPORTUNITIES AND YOU:**

**What are your long-range goals?** (Please feel free to use additional room at end of this form.)

Career:

Personal:

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

**Please explain briefly your interest or other pertinent information about yourself and how you feel the IFYE program will benefit you in these areas:**

**List** interests/experiences in areas such as: agriculture, agribusiness, water quality, ecology, forestry, and/or life and consumer science areas, etc. **Explain** the areas in which you have been involved, the extent and years of involvement. ***Note:** If more space is needed, please attach additional page(s).*

**Leisure Interests:**

**SPECIAL STUDY INTEREST:** While abroad, you should continue to focus on your career interests, in addition to the cultural aspects of the exchange. To the extent possible, we will consider your interests when making country and host family placements. Please describe your interest(s) (e.g., agriculture, economics, politics, environment, nutrition). *Note: If more space is needed, please attach additional page(s).*

Be specific - give details:

**SMOKING:**

Do you use tobacco in any form? ☐ Yes ☐ No  
If yes, please explain:

Can you be placed with a smoking family? ☐ Yes ☐ No

**HEALTH:** A medical form signed by your physician will be required after the selection process.

**INSURANCE**

Name of medical insurance carrier:   
I.D. #:  Group#:

**REGION & COUNTRY PREFERENCES:** Programs are normally categorized according to the following regions: Africa, Asia, Caribbean, Europe, Central America, North America, South America, Middle East, South Pacific, etc. Individual countries should then be selected for each region. *Note: Not all regions participate annually.*

	First Choice	Second Choice	Third Choice	Fourth Choice
<b>Region</b>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
<b>Country</b>				
1 <sup>st</sup> Choice	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
2 <sup>nd</sup> Choice	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
3 <sup>rd</sup> Choice	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>

List regions / countries that are NOT acceptable to you and please specify why: *(NOTE: Programs will not be considered for countries currently on the U.S. Department of State "Watch List.")*

Region/Country	<div style="border: 1px solid black; height: 15px;"></div>	Reason:	<div style="border: 1px solid black; height: 15px;"></div>
Region/Country	<div style="border: 1px solid black; height: 15px;"></div>	Reason:	<div style="border: 1px solid black; height: 15px;"></div>

Earliest date you can depart. *(If after mid-June, please explain reason):*

**Religion:** *(For information of host. If Protestant, give denomination:*

**GENERAL INFORMATION:**

Other information helpful in your placement with a program (*include special interests or medical considerations*): (*Please use additional sheet at end of this form, if needed.*)

How did you learn about IFYE Exchange Program? (*Check all that apply.*)

- ☐ Former Participant   ☐ Cooperative Extension   ☐ Young Farmers and Ranchers Conference  
☐ Print Media (ex: Newspaper) (specify) \_\_\_\_\_ ☐ National 4-H Congress  
☐ FFA Conference   ☐ AFA Leaders Conference   ☐ Other (specify) \_\_\_\_\_

**REFERENCES:** Must be individuals other than relatives. **Note:** *It is recommended that one reference be from a youth organization leader in which you have participated.*

Name: \_\_\_\_\_ Phone: ☐ (H) ☐ (W) ☐ (C)  
Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Title/Relationship to Applicant: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: ☐ (H) ☐ (W) ☐ (C)

Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Title/Relationship to Applicant: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: ☐ (H) ☐ (W) ☐ (C)

Address: \_\_\_\_\_

Email address: \_\_\_\_\_

Title/Relationship to Applicant: \_\_\_\_\_

**FEE:** \$3000

- Program fee payment method to be discussed individually with National Program Director upon submission of application.

Scholarships may be available through your state. Please check with National Program Director, Alan Lambert ([alanelambert@ifyeusa.org](mailto:alanelambert@ifyeusa.org)) for this availability.

**I CERTIFY** that all information on this application is true and complete to the best of my knowledge. I understand the purposes and objectives of the IFYE program and agree to participate within the framework of the program for which I am accepted.

*NOTE: If submitting electronically, a typed signature will be acceptable.*

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Applicant's Signature

Date

### **WHY IFYE? (ONE-PAGE ESSAY)**

(Do not extend this to another page.)

Include the following information:

- (1) Why are you interested in participating in this exchange program?
- (2) What do you hope to gain?
- (3) How do you intend to apply what you hope to learn?
- (4) What possible impact do you think you can have because of this experience?

### IFYE LETTER TO HOST FAMILY

Please write a separate letter to your potential host family describing yourself, your family, education, characteristics, interests, hobbies, etc. (NOTE: You may use additional pages at the end of this form - Please be sure to title your addition to relate the the question being answered.)



**IFYE EXCHANGE PROGRAMS**  
**ADDITIONAL QUESTIONS**  
Due with Application

*Similar questions may also be asked in an oral interview.*

These questions are designed to better prepare you for the home stay exchange experience. Think carefully and be specific!

Please print or type answers to the following questions. You may extend your response by using one of the blank pages at the end of this application.

1. What is the hardest thing for you about listening?
2. What takes you out of your comfort zone and how do you cope when feeling uncomfortable?
3. This exchange is a cultural immersion program. All host countries have cultural differences from your home, community, county and state. How will you react when faced with cultural situations that differ from what you have grown up with?
4. When you hear the word diversity, what do you think of and how does it relate to this exchange experience?





## IFYE OUTBOUND CULTURAL PROJECT

Each outbound delegate is asked to prepare a cultural project that he/she can share with his/her host family.

The cultural project should focus on an aspect of American culture that is important to you. The project can be in any form and on any topic. For instance, previous delegates have:

- Demonstrated how to throw a lasso
- Prepared their favorite food dish
- Sung a favorite pop song (with accompanying dance moves!)
- Taught their favorite sport/game and then played it with their host family

Pick a project that you enjoy and that you're comfortable teaching others. You should also be prepared to leave a "hard copy" of your project with your host family. For instance, write down the recipe for your favorite dish, write down the lyrics for your favorite song, take photographs of your dance moves, or prepare a guidebook with pictures on your favorite sport. The main goal is for you to share a piece of American culture with your host family and new friends ... and to have fun!

Please describe your project in the space below and/or use one of blank pages at end of form.





