

Send via:
Email – nica@tds.net
or mail to:
Costa Rica
P.O. Box 4272
Chapel Hill, NC 27515



Please attach a
wallet size photo
or email digital photo

APPLICATION SUMMER 2019

Please fill in your Program **Start** date and **End** date below (mm/dd) - (mm/dd)

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-These will be your flight dates as well-

Required Student information: (Write name clearly and exactly as it will appear on your passport)

Last Name _____ First _____ Middle Initial _____

Address _____ City _____ State _____ Zip _____

Home Phone () _____ Age _____ (at program start date) Date of Birth ____/____/____

Students e-mail _____ Name of nearest major Airport _____

Are you a U.S. Citizen? _____ Passport Number _____ Date Passport expires _____

Name of your high school _____ Grade level _____ Spanish teacher _____

Parental/Guardian Information: *Carefully print below your most reliable parent e-mail address, we use this e-mail for important program information and for communicating from Costa Rica:*

Parent Name: _____ Phone: Cell _____ Work _____

Parent Name: _____ Phone: Cell _____ Work _____

Primary Email: _____ 2nd Email: _____

Other Guardian/Emergency contact: Name: _____ Phone: _____

In order to enjoy a safe, healthy and rewarding experience; Parents please describe below in detail any personal needs!
(Medical conditions, prescriptions, diet concerns, etc.)

2019 Community Service/Spanish Session (Application part 2)

Community service: During our afternoon youth service we provide the energy to sponsor fun and positive events that help support the goals of local schools and children centers. Students are most successful interacting with local youth when they collaborate in shared interests! Choose an area you find motivating.

Please circle only one primary youth service category:

1. Tutor –one on one (Math, English, Writing) 2. Sports /Games /Outdoor activities. 3. Creative (teach or help lead an art project such as painting, music, performance, dance or arts and crafts using local resources). In the primary category selected above describe your experience/skills. *Example: I can teach soccer skills, I play high school soccer and have participated in soccer camps and clinics since I was eight years old.*

Other interests/talents: _____

Spanish

Please Circle the Spanish level that best describes you:

- Motivated beginner - Some understanding but don't speak - Can speak short sentences-
- I have solid Spanish skills but lack speaking experience - I'm very confident in Spanish

High school Spanish course completed _____ (example: Spanish 2, AP Spanish)

What do you think is your greatest challenge in becoming a confident Spanish speaker? (example: listening, afraid to make mistakes, lack experience, verb tense/ vocabulary understanding. _____

Ever traveled to Latin America? ____ If yes, where/with whom _____

Spanish Sessions are focused on building Speaking confidence through collaboration in school and community activities. In small groups students receive guidance, language support and one-on-one tutoring from their assigned Spanish coach. Confidence grows from engaging local people – having fun exploring a new way of living and thinking.

Host Family Placement: List foods I cannot/or will not eat.

Host family lodging: circle preference (leave blank if you have no preference)

1. I'm willing to share a room with my host sister/brother (same gender)
2. I absolutely need a private room with host family.

How would you describe yourself: (example: early riser, somewhat shy, enjoy reading, I have a pet dog, picky eater, I sing in the shower, favorite foods, etc.

2019 Student/Parent Reality Check (Application part 3)

Students please circle the numbers that you agree with!

1. I understand to improve Spanish and gain fluency requires a total commitment to interaction.
2. My actions in country will reflect the values of my country, my family and myself.
3. I understand that this is a full immersion program, and not a tour trip.
4. I understand that the majority of daily activities require walking.
5. A new language and home life will require extra patience, additional energy and plenty of humor.
6. I realize that I will have to adapt to the local environment and not the other way around.
7. It is my responsibility to understand and adapt to the rules and changes that may occur.
8. Alcohol or drug use will result in immediate dismissal.
9. I will speak only Spanish during Spanish sessions.
10. While in Costa Rica I will promptly contact the Program Director for any concerns.

STATEMENT OF RESPONSIBILITY, AND AUTHORIZATION TO PARTICIPATE

I affirm that the information I have given in support of my application is correct to the best of my knowledge. My participation in the program is voluntary. With acceptance of my application, I will: (1) assume full legal and financial responsibility for my stay in Costa Rica Youth Exchange; (2) voluntarily and without reservation on behalf of myself, my heirs, and my estate, hold harmless the Costa Rica Youth Exchange Program, its staff, from any and all liability, loss, damages, costs, and expenses related to the Costa Rica travel program (including those related to travel to and from the program site). (3) grant the Costa Rica Youth Exchange Program full authority to act in any attempt to safeguard and preserve my health or safety during my participation in the program including authorizing medical treatment on my behalf. (4) take no unnecessary risks during my stay abroad, and understand that participation in this program has inherent risks (activities such as, but not limited to, sports, swimming, hiking, etc., these activities are offered for enjoyment, but are not mandatory); (5) make immediate repayment at the conclusion of the program for any special expense incurred on my behalf or for funds advanced to me; (6) conform to all standards of conduct related to my Costa Rica Youth Exchange Program; (7) accept termination of participation in the program abroad with no refund of fees and accept responsibility for extra- transportation costs to my home if I fail to maintain the program standards; (8) consent to photo or video of me being used in promoting this educational exchange, I agree to such use.

PROGRAM STANDARDS OF CONDUCT:

Absolute respect, cooperation and compliance with program staff, teachers, school directors and host families. Absolutely no alcohol, drugs, smoking or physical relationships. As a student participant I agree to uphold the program rules which include curfews, safety guidelines, and personal conduct. I have read and understand this form completely. I have read the program "Terms and Conditions" and by signing below agree to those terms. As Parental Guardian I affirm my son/daughter is in excellent physical and mental health and has the maturity to adapt to the challenge of living in a foreign community. While attending the Costa Rica Youth Exchange Program my son/daughter is under the authority and guardianship of the Program Director, Ilba Prego. The Program Director maintains all authority over staff, host families, and community engagement. As parental guardians we have a copy of the program Terms and Conditions and by signing below we agree to those terms and the terms of this application.

Student Signature _____ Date _____

Parental Signature _____ Date _____

Parental Signature _____ Date _____

Costa Rica Youth Exchange 2019