

CJD Exchange Program with the U.S.A.

Application Form for school year

Please type or print.

Full name: _____

Date of birth: ____/____/____
month / day / year

Address: _____

Telephone: _____ - _____
area code home number

Fax: _____

E-Mail: _____

Citizenship: _____

Passport number: _____

Father's name: _____ Occupation: _____

Mother's name: _____ Occupation: _____

Business telephone/fax/E-Mail (if applicable):

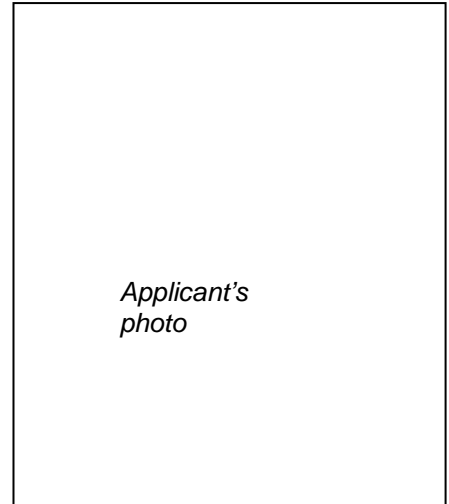
Are your parents divorced/separated? _____

If yes, who is your legal guardian: _____
Name (and address if different from above)

Please give names and ages of your siblings:

Preferred accommodation: a host family a boarding school no preference.

I'm interested in the exchange for: the whole school year the first semester the second semester.



Please return to:
CJD Arnold-Dannenmann-Akademie
Christliches Jugenddorfwerk Deutschlands e.V.
Institut für Internationale und Ökumenische Arbeit
Ottilienberg, D-75031 Eppingen

Personal information to be completed by the student

1. How do these personality traits describe you? Use the numbers 1,2,3,4,5 with 5 being very true and 1 being hardly applicable.

easy going	<input type="checkbox"/>	informal	<input type="checkbox"/>	quiet	<input type="checkbox"/>	independent	<input type="checkbox"/>
extroverted	<input type="checkbox"/>	neat	<input type="checkbox"/>	reserved	<input type="checkbox"/>	patient	<input type="checkbox"/>
friendly	<input type="checkbox"/>	optimistic	<input type="checkbox"/>	strong-willed	<input type="checkbox"/>	talkative	<input type="checkbox"/>
humorous	<input type="checkbox"/>	organized	<input type="checkbox"/>	studious	<input type="checkbox"/>	individualistic	<input type="checkbox"/>

2. Indicate your favorite interests.

Political Activities: _____

Community Service: _____

Sports: _____

Computers: _____

Dance: _____

Music: _____

Arts & Crafts: _____

Church: _____

Others: _____

Which of the above mentioned activities would you like to continue in Germany?

Are there any sports and activities which you would like to take up there?

3. Have you had any work experience or part-time job? If so, which? _____

4. Do you like pets/animals? _____ Are you allergic to any animals? If yes, which? _____

List any pets/animals you have at home: _____

5. Smoking

I do not smoke.

I smoke occasionally, but I could restrict my smoking according to existing laws and rules in the German society and my host family.

I smoke, and I feel that I must be placed with a host family that would allow me to smoke in their home.

I object to smoking and I want to be placed with a non-smoking family.

6. Apart from the benefit of improving your German, what are your reasons for participating in the CJD exchange program?

7. Other personal wishes: _____

8. Mention activities that you and your family often do together.

9. You might be expected to help with household chores in your host family.

Do you do any in your own home? No Yes Which? _____

10. What experience do you have dealing with babies/children? _____

11. Host parents are often stricter with family rules, curfews, and behavior than your natural parents.

I could easily accept that. I would have difficulties in accepting that. I could not accept that.

12. Religious affiliation: _____ Your level of participation: Active Average Little interest.

Would you be willing to go to church regularly with your host family?

Yes, if it does not collide with my own religious conscience.

No.

It depends.

13. What are your favorite subjects at school? _____

14. a) Are there any subjects you will have to take in your host school? _____

b) Are there any subjects you personally would like to take? _____

15. What foreign languages have you studied/ do you speak?

How do you rate your ability? (Use E = excellent, G = good, F = fair, P = poor)

<i>Language</i>	<i>Reading comprehension</i>	<i>Writing</i>	<i>Speaking</i>	<i>Listening comprehension</i>

With this application please submit a typed or printed letter to your host family/school. Use it as an opportunity to introduce yourself and your family, your home, neighborhood and community. Be as specific as possible. Also describe in detail your personal attitudes, habits, likes and dislikes, interests and hobbies. Please add anything you would like your host family/school to know about you (values, achievements, social, and political activities, etc.).

School Recommendation

Student's Name: _____

Day student Boarder

Name and address of school _____

Number of students in school: _____

Rating of the student in the following categories:

	Excellent	Good	Fair	Poor
Academic ability				
Academic performance				
Study habits				
Initiative				
Responsibility				
Readiness to cooperate				
Relationship with teachers				
Relationship with classmates				
English language ability				
Potential as an exchange student				

Academic and educational information on the student:

Comments on the student's social behavior:

Student is suited for academically demanding schools: _____

Signatures: _____

Exchange program advisor

Principal

Director of Dormitory
(If applicant is a boarder)

Academic transcript

(English translation)

Academic year _____ **Term** _____ **Grade** _____

Student Name: _____

Subjects	Hours per week	US Grade
German		
English		
French		
Latin		
Russian		
Spanish		
History		
Social Studies		
Geography		
Religion		
Music		
Art		
Mathematics		
Physics		
Chemistry		
Biology		
Computer Science		
Physical Education		

Extracurricular activities: _____

School Signature: _____

Official seal or stamp:

Parent information and comments

Applicant's name: _____

Mother's name: _____ Father's name: _____

Address and telephone if different from page 1 of student's application form:

You are welcome to give information on your child which might be helpful for the host family/school.

Parental Confirmation

We hereby consent to the application of our child for this exchange. We also agree to pay the tuition as specified in the information CJD STUDENT EXCHANGE GERMANY. We give permission to our child to go on short-time and short-distance trips within Germany (no hitch-hiking). Extended journeys, (within Europe, for example,) need our extra permission. Participation in swimming activities is not allowed / is allowed.

Obligations

In case of being accepted as an exchange student, regardless of age, - we hereby agree to follow the directives of the CJD and its co-operating schools and parents - we also acknowledge that the CJD only takes responsibility for the defined period of the exchange. During the time of the exchange students are not permitted to make life-changing decisions such as converting their religion, marrying, etc.

Date: _____

Signature of parents: _____

Signature of student:

FRAGEBOGEN FÜR Eltern Betr. Impfung von Schülern
Student Immunization Questionnaire for Parents

Name des Schülers/der Schülerin
 Students Name

Geburtstag
 DOB

Impfungen / Immunizations (minimum):

(Please note: Immunization requirements in the US may be different from those in Germany)

- | | |
|--|-----------------------|
| 1) 3 x Kinderlähmung (Schluckimpfung)
3 doses of polio vaccine | ja nein*
yes no* |
| davon mindestens eine nach dem ersten Lebensjahr
at least one of it after the first birthday | ja nein*
yes no* |
| 2) Diphtherie und Keuchhusten und Tetanus
(3 Impfungen)
Pertussis, Diphtheria and Tetanus
(3 doses) | ja nein*
yes no* |
| 3) Masern und Röteln, (1 Impfung einzeln oder kombiniert)
nach dem ersten Lebensjahr
Measles and Rubella (1 dose each or combined)
after the first birthday | ja nein *
yes no * |

 Datum/Date

 Unterschrift d. Eltern od. Erz.-Ber.
 Signature of parents or guardian

* zutreffendes bitte einkreisen
 * correct answer is circled

**CJD Arnold-Dannenmann- Academy
Institute for International and Ecumenical Cooperation
Student Exchange**

*CJD Arnold-Dannenmann-Akademie
Institut für Internationale und Ökumenische Arbeit
Schüleraustausch*

Permission to Perform Emergency Surgery

(Operationserlaubnis)

(Student's Name)

(Name des Schülers/der Schülerin)

This is to authorize the host family/boarding School's administration in an emergency and in case I/we cannot be contacted to permit physicians and hospitals to perform invasive procedures (surgery, x-ray treatment, etc) on my/our child.

Hiermit erteile/n ich/wir der Gastfamilie/der Internatsleitung die Vollmacht, in Notfällen bei meiner/unserer Nichterreichbarkeit, Ärzten und Krankenhäusern gegenüber eine Erlaubnis für körperliche Eingriffe (Röntgen, Operationen, etc.) an meinem/unserem Kind, zu erteilen.

(Place, Date)

(Ort, Datum)

(Parents' Signature)

Unterschrift d. Erziehungsberechtigten

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Declaration of Liability

(Haftungserklärung)

(Student's Name)

(Name des Schülers/der Schülerin)

I/we commit myself/ourselves toward the host family/boarding school's administration to make good any damage to facilities and furniture caused by my/our child.

Ich/wir verpflichte/n mich/uns der Gastfamilie/Internatsleitung gegenüber, für den Ersatz von Schäden an Einrichtung und Mobiliar aufzukommen, die durch mein/unser Kind verursacht werden.

(Place, Date)

(Ort, Datum)

(Parents' Signature)

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Permission to Participate in Swimming

(Schwimmerlaubnis)

(Student's Name)

(Name des Schülers/der Schülerin)

**This is to permit my/our child to participate in the school's swimming events/
instruction under appropriate supervision/even without supervision. (Please
cross out what is not applicable.)**

*Mein/unser Kind erhält die Erlaubnis im Rahmen von schulischen Veranstaltungen
unter Aufsicht/auch ohne Aufsicht (nicht zutreffendes bitte streichen) zu schwimmen.*

(Place, Date)

(Ort, Datum)

(Parents' Signature)

Unterschrift d.Erziehungsberechtigten