

**Gresham-Ebetsu Sister City Association**

**Student Application for Exchange to Ebetsu, Japan**Deadline: End of February

Contact Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| First name: | | Last name: | | Preferred name: |
| Address: | | | | |
| City: | | State: | | Zip: |
| Mailing address (if different from above): | | | | |
| City: | | State: | | Zip: |
| Phone: | Circle: H/W/C | | Email: | |

Personal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date of birth: | | Age: | | Sex: |
| Allergies (food or environmental)?  Yes / No  If yes, explain: | Do you have any health problems we should know about? Please attach another page if you need more room. | | | |
| Do you smoke? Yes / No |
| Does smoke bother you? Yes / No |
| Are there any pets that you would not like to have in a potential host home? Explain: | | | | |
| What are your favorite hobbies and interests? | | | | |
| How long have you lived in the Gresham area? | | | Do you have a passport? Yes / No | |
| In a few words, why do you wish to become a Student Ambassador? | | | | |
| How do you feel you would profit from a trip abroad? | | | | |

Family Information

Mother or Female Guardian

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Age: | | Occupation: |
| Phone: Circle: H/W/C | | Email: | |

Father or Male Guardian

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | Age: | | Occupation: |
| Phone: Circle: H/W/C | | Email: | |

Brother/Sister (please circle one)

|  |  |  |
| --- | --- | --- |
| Name: | Age: | Grade: |

Brother/Sister (please circle one)

|  |  |  |
| --- | --- | --- |
| Name: | Age: | Grade: |

Brother/Sister (please circle one)

|  |  |  |
| --- | --- | --- |
| Name: | Age: | Grade: |

Brother/Sister (please circle one)

|  |  |  |
| --- | --- | --- |
| Name: | Age: | Grade: |

Additional siblings on back

Education

|  |  |  |
| --- | --- | --- |
| Current high school: | | Grade level: |
| Teacher who referred you: | | Current GPA: |
| Favorite subjects: | Sports/extracurricular activities: | |

Language Skills

|  |
| --- |
| Which foreign languages have you studied? |
| Which foreign countries have you visited? |
| Have you had a chance to use your language skills outside the classroom setting (i.e. pen pals, reading books or magazines, speaking with native speakers)? |

|  |  |
| --- | --- |
| How would you describe your language skills? Please check one: | |
|  | **Beginner**: I can express myself in simple sentences, such as asking directions, ordering food, but still have problems in understanding native Japanese language speakers in conversations. |
|  | **Intermediate**: I am able to understand most Japanese social conversations and can read Japanese. I can make myself understood when speaking Japanese in most social situations. |
|  | **Advanced**: I am able to clearly speak Japanese and express myself clearly as well as understand Japanese in all forms of conversations. |

**Application Checklist**

**Please make sure you have finished everything for your application before submitting by the end of February. Incomplete applications will not be considered.**

* Read the Student Eligibility requirements
* Completed the Application in its entirety
* Attached a photo suitable for potential host family
* Attached two recommendations on form provided
* Attached a letter addressed to the Gresham Ebetsu Sister City Association explaining why you wish to visit Ebetsu, Japan
* Signed Student-Parent Agreement

I, , have completed the application honestly and to the best of my ability and have attached all requested forms.

Student Signature:

Date:

Japanese Instructor’s Signature: