
Rotary Youth Exchange

Short-Term Exchange Program (STEP) Application

Form developed by Europe, Eastern Mediterranean and Africa (EEMA) Youth Exchange Conference and promoted by Rotary International



Rotary District Short Term Exchange Program

Submit completed application to:

The District/ Club Youth Exchange Officer should complete the adjacent box and add their District Number in the space above before passing on to the student for completion.

General Information and Instructions

This form is designed to be fillable and saveable using Adobe Reader. It may not retain these attributes if using another pdf program. Adobe Reader is available as a free download from <http://get.adobe.com/reader>

Types of Short Term Exchange Programs

Family to family exchange

(Homestays Ages 15-19)

General Application Pages 3-7 and Supplementary Page A

This program is for individual participants or groups of participants to stay with host families in another country for a few weeks. Most Homestays are reciprocal; for example, a Brazil-Germany exchange may start with a young person from Brazil spending a few weeks in Germany, followed by a visit from a German youth to Brazil. Such exchanges are normally family-to-family or club-to-club. During the course of this program it may be possible to participate in Tours for groups of young people from the same country or several different countries.

Youth Camps and Tours

(Ages 15-24 as determined by the organisers of the individual camp or tour)

General Application Pages 3-7 and Supplementary Page B

These camps bring together participants from several countries and take place usually in summer. Camps may have themes such as sports, culture, nature, language, computer or participation in a community service project. Some camps provide leadership training and address international concerns. By bringing together international participants, camps promote cultural tolerance and international understanding through friendship. Where possible young people with disabilities will be included in the camp or tour programs, however for the more severely disabled special camps known as 'Handicamps' are organised where participants can be assisted by a carer. In addition to this Application Form further information from participants will be required by the organisers.

Instructions for Rotary Youth Exchange Program Application

Read all directions on each page carefully **before** completing the application.

If you are accepted into the short term program this application will be sent to the hosting country and will serve as your introduction to the people who will organize your stay or host you.

Components of Your Application

General Information: Pages 3 - 7 containing your Personal Information, Acceptance of the Rules and Conditions and the Guarantee Form;

Supplementary Information: Pages A or B dependent upon the program in which you wish to participate;

Copy of your passport or birth certificate.

Completing your Application

The form is designed to be completed on a computer and unless there are special circumstances which prevent computer generated applications then this is the preferred method.

Answer all questions completely and as asked (do not write "same," "see above," or "see page ____"). Enter the information into the space provided unless directed otherwise. To avoid any chance of misinterpretation take care with your grammar and spelling.

If completing by hand your application must be legible. Particular care should be taken with email addresses. Wherever the application asks for your full legal name, enter your name exactly as it appears on your passport or birth certificate. On pages that have a box in the upper right-hand corner marked "Applicant Name", enter the preferred form of your name. For example, an applicant whose full legal name is Joseph David Smith might enter Joseph Smith or Joe Smith.

Printing Your Application and Signing the Forms

You must submit four complete printed sets of this application. (You may also wish to make an additional set for your own records.) Sets 2-4 can be good quality photocopies. **On all copies the signatures must be ORIGINAL.** To achieve this:

1. Complete the application form but do not sign it.
2. Print four sets of the completed application (if completing by hand, make three good-quality photocopies of the original).
3. Add your signature and those of your parents/legal guardians to all copies.

The photo of yourself on Page 3 may be digitally inserted or attached. If attached it must be an original photograph on all four sets, not a color photocopy. The photos submitted as part of Supplementary Page A may also be digitally inserted but, if attached, must include at least one set of originals. The other three sets may be good-quality color photocopies.

If you have been told that the form can be submitted electronically then the completed form should be saved as (yourname).pdf and submitted with a separate copy of Page 6 complete with all signatures.

To insert digital photographs using Adobe Reader

Open a new document in WORD. Select Insert > Picture then select the photo from file and click 'Insert' button. Drag corner of photo to resize to approximately 5.5cm x 6 cm (2in. x 2.5in.) then position cursor over photo> right click> left click on 'copy' from drop down menu. Open the STEP Application Form in Adobe Reader and go to page 3. If using Adobe Reader 9 select Tools > Comment & Mark Up > Stamps > 'Paste Clipboard Image as Stamp Tool'. If using Adobe Reader X select Comment> Annotations> left click on stamp icon> left click on 'Paste Clipboard Image as Stamp Tool'. Position stamp shaped cursor over box headed 'Smile!> double left click> resize and position photo.

NOTE:- When printing the form the 'Documents and Stamps' setting must be selected in the 'Comments and Forms' box of the Print Set Up otherwise the photo will not be printed.

Questions?

If you have any questions about completing this application, check with your local Rotary Club's Youth Exchange officer. Once you've completed your application, return it to your local Rotary Club/District as instructed.

Data Protection

Your information will be shared with Rotary International, the Sending and Hosting Rotary Districts Youth Exchange Organizations' and Clubs, your appointed counselor and host families. It will only be used for official RI business and not sold to or shared with other third parties, unless required by law to be released.

Statement of Conduct for Working with Youth

Rotary International strives to create and maintain a safe environment for all youth who participate in Rotary activities. To the best of their ability Rotarians, Rotarians' spouses, partners, and other volunteers must safeguard the children and young people they come in contact with and protect them from physical, sexual and emotional abuse.

Adopted by the Rotary International Board of Directors, November 2006



Rotary District
Short-Term Exchange Program
Personal Information

Before you begin your application, be sure to read all instructions on the prior page.

1. Program Information

This application refers to the following New Generations Exchange Program (please tick the appropriate box):

☐ Family to Family Individual Exchange	☒ Youth Camps
☐ Group Exchange / Tours	☐ Other

2. Applicant Information

Full Legal Name as on passport or birth certificate (use capital letters for your FAMILY name; e.g., SMITH John David)			Name You Wish to be Called		Gender
Home Address - Street			Town/City	State/Province	Postal Code
Postal Address (if different) - Street			Town/City	State/Province	Postal Code
E-mail Address			Home Phone Number		Mobile Phone Number
Place of Birth (City, State/Province, Country)			Citizen of (Country)		Date of Birth (e.g., 23/April/2008) //

3. Parent/Legal Guardian Information *(Preferred but not essential if applicant is over 18 years of age)*

Full Name of Father/Legal Guardian		Rotarian ?	If yes, name of Rotary Club		
		no			
Address - Street		Town/City	State/Province	Postal Code	Country
E-mail Address		Home Phone Number		Mobile Phone Number	
		+33(0)		+33(0)	
Occupation		Business Phone Number		Fax Phone Number	
		+33(0)		+33(0)	
Full Name of Mother/Legal Guardian		Rotarian ?	If yes, name of Rotary Club		
		no			
Address - Street		Town/City	State/Province	Postal Code	Country
E-mail Address		Home Phone Number		Mobile Phone Number	
		+33(0)		+33(0)	
Occupation		Business Phone Number		Fax Phone Number	
		+33(0)		+33(0)	
Parent/legal guardian to contact first in the event of an emergency (specify "Father", "Mother", etc.): Father					
☐ Check here if your parents are divorced or separated. If applicant is under 18 authorizations must be obtained from all parents/legal guardians and others who have legal rights to decisions affecting the student's participation. Explanation is required if signatures of two parents or legal guardians are not provided.					

4. Personal Background

Religion	Do you have any special requirements regarding religious observance? Please detail:
Dietary Restrictions	(Enter "None", or explain with details - e.g., vegetarian, vegan, allergic to...)
Do you smoke or use tobacco products?	If yes, please explain.
Do you drink alcohol?	If yes, please explain.
Have you ever used illegal drugs?	If yes, please explain.

Answering yes to any of these questions will not necessarily eliminate you as a candidate; however, special consideration may be required with regards to host family or host country.

5. Languages

Your Native Language		Proficiency in Non-Native Language(s) (indicate Poor, Fair, Good, or Fluent)		
Non-Native Language(s)	Years Studied	Speaking	Reading	Writing

6. Health Information

Do you have any mental health/medical/dental conditions?	☐ Yes	☒ No
Have you been treated for mental health/medical conditions in the past two years?	☐ Yes	☒ No
Have you taken any prescribed medications in the past six months?	☐ Yes	☒ No
Do you have any special health requirements (disabilities, allergies etc.)?	☐ Yes	☒ No

If you have answered 'YES' to any of the above please explain fully in the space below providing as much information as possible, including the name of any medication and the reason prescribed and include a copy of the doctor's prescription. Use additional sheets of paper if necessary.

For more personal and background information please use the appropriate Supplementary Page.

7. Sending District and Club Contacts(to be completed by Sending Rotary Club and District representatives)

Sending District Number 1690	Name of Sending District Youth Exchange Chair Duval	E-mail Address bea.duval17@orange.fr			
Address - Street -	Town/City -	State/Province -	Postal Code -	Country France	
Home Phone Number +33(0)	Business Phone Number +33(0)	Moblie Phone Number +33(0)682494463	Fax Number +33(0)		
Sending Rotary Club La Rochelle	Name of Sending Club Youth Exchange Officer Couardier Isabelle	E-mail Address isabellecouardier@wanadoo.fr			
Address - Street -	Town/City -	State/Province -	Postal Code -	Country France	
Home Phone Number +33(0)	Business Phone Number +33(0)	Moblie Phone Number +33(0)615516791	Fax Number +33(0)		



Rotary District Short-Term Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

As a Youth Exchange Program participant supported by a Rotary club or district, you must agree to the following rules and conditions of exchange. Violation of any of these rules may result in dismissal from the program and immediate return home, at your expense. Please note that districts may edit this document or insert additional rules if needed to account for local conditions.

Rules and Conditions of Exchange

1. You must obey the laws of the host country. If found guilty of violating any law, you can expect no assistance from your sponsors or native country. You must return home at your own expense as soon as released by authorities.
2. You will be under the host district's authority while you are an exchange program participant and must abide by the rules and conditions of exchange provided by the host district. Parents or legal guardians must not authorize any extra activities directly to you. Any relatives you may have in the host country will have no authority over you while you are in the program.
3. You are not allowed to possess or use illegal drugs. Medicine prescribed to you by a physician is allowed.
4. The illegal drinking of alcoholic beverages is expressly forbidden. Students who are of legal age should refrain. If your host family offers you an alcoholic drink, it is permissible to accept it under their supervision in the home.
5. You may not operate a motorized vehicle, including but not limited to cars, trucks, motorcycles, aircraft, all-terrain vehicles, snowmobiles, boats, and other watercraft, or participate in driver education programs.
6. You must have travel insurance that provides coverage for accidental injury and illness, third party liability, death benefits (including repatriation of remains), disability/ dismemberment benefits, emergency medical evacuation, emergency visitation expenses, 24-hour emergency assistance services, and legal services, in amounts satisfactory to the host Rotary club or district, with coverage from the time of your departure from your home country until your return.
7. You must purchase return travel ticket before departure from the home country.
8. You must attend all orientations and trainings offered by the sending and host districts and clubs.
9. You must have sufficient financial support to assure your well-being during your exchange. Your host district may require a contingency fund for emergency situations. Unused funds will be returned to you or to your parents or legal guardians at the end of your exchange.
10. You must follow the travel rules of your host district. Travel is permitted with host parents or for Rotary club or district functions authorized by the host Rotary club or district with proper adult chaperones. The host district and club, host family and if you are under 18, your parents or legal guardians must approve any other travel in writing, thus exempting Rotary of responsibility and liability.
11. You must return home directly by a route mutually agreeable to your host district and, if under 18, your parents or legal guardians.
12. Any costs related to an early return home or any other unusual costs (language tutoring, tours, etc.) are the responsibility of you and your parents or legal guardians.
13. You should communicate with your host family, if applicable, prior to leaving your home country. The family's information must be provided to you by your host club or district prior to your departure.
14. Visits by your parents or legal guardians, siblings, or friends while you are on exchange are strongly discouraged. Such visits may only take place with the consent of the host club and district and within their guidelines.
15. Talk with your host counselor or other trusted adult if you encounter any form of abuse or harassment.

Recommendations for a Successful Exchange

1. Smoking is discouraged. If you state in your application that you do not smoke, you will be held to that position throughout your exchange.
2. If placed in a host family, respect your host's wishes. Become an integral part of the family, assuming duties and responsibilities normal for a person of your age or for children in the family.
3. Make an effort to learn the basics of the language of the host country.
4. Attend Rotary-sponsored events and, if living with a family, host family events, and show an interest in these activities. Volunteer to be involved - do not wait to be asked.
5. Avoid serious romantic activity. Abstain from sexual activity.
6. Do not borrow money. Pay any bills promptly. Ask permission to use the phone or computer, keep track of all calls and time on the Internet, and reimburse the costs you incur.
7. Limit your use of the Internet and mobile phones. Excessive or inappropriate use is not acceptable.
8. If you are offered an opportunity to go on a trip or attend an event, make sure you understand any costs you must pay and your responsibilities before you go.

PERMISSION FOR MEDICAL CARE AND RELEASE FROM LIABILITY

(If applicant is under 18 years of age delete this paragraph)

I, the applicant, do release from liability and grant permission as noted of the following while I am participating as a Rotary Youth Exchange program participant:

(If applicant is over 18 years of age delete this paragraph)

We, the parents/legal guardians of the applicant who have the sole and legal right to make the decisions on the health and care of the applicant, do release from liability and grant permission as noted of the following while our son/daughter/ward is participating as a Rotary Youth Exchange student:

1. In the event of accident or sickness, I authorize any Rotarian, authorized chaperones of Rotary activities, and/or host parent(s) of the student to select the appropriate medical facility and physician(s)/dentist(s) to provide treatment.
2. I give permission for any operation, administration of anesthetic, or blood transfusion that a medical practitioner may deem necessary or advisable.
3. I further consent to any medical or surgical treatment by a licensed physician, surgeon, or dentist that might be required for any emergency situation.

I agree to hold harmless Rotary International, any Rotary District or Club, Rotarian, Rotary chaperone, or host family for any intervention in an emergency situation regardless of final outcome. I agree to assume all financial obligations beyond those covered by insurance for any medical treatment rendered.

APPLICANT'S DECLARATION

IN CONSIDERATION of the acceptance and participation of the applicant in this program, the undersigned APPLICANT to the full extent permitted by law, hereby releases and agrees to defend, hold harmless, and indemnify all host parents and members of their families, and all members, officers, directors, committee members, and employees of the host and sponsor Rotary clubs and districts, and of Rotary International, from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of any negligent act or omission, excepting gross negligence or intentional conduct, of any such persons or entities, which may be suffered or claimed by such applicant, parent, or guardian during, or as a result of, the participation by the applicant in such Youth Exchange program, including travel to and from the host country. As the undersigned applicant I declare that:

1. I have read and understood the Program Rules and Conditions of Exchange and agree to abide by these rules and others imposed on me with due notice during my time as an exchange student in the host country.
2. I have read and understand the Statement of Conduct for Working with Youth. I understand that all Rotarians and host families are expected to have read and understood this statement. I understand that I will be provided with training and written material on whom to contact and procedures I must follow should I encounter any form of abuse or harassment.

I am in good health and as a Rotary Youth Exchange participant understand the importance of the role of a youth ambassador and, should I be chosen to represent my sending Rotary club and district, school, community, state/province, and country will, to the best of my ability, maintain the high standards required. I further state that all the detail entered by me in this application and the attached documents are true and accurate to the best of my knowledge.

DECLARATION BY PARENTS/LEGAL GUARDIANS

(delete if Applicant is over 18)

IN CONSIDERATION of the acceptance and participation of the applicant in this program, WE, his/her PARENTS or LEGAL GUARDIANS, to the full extent permitted by law, hereby release and agree to defend, hold harmless, and indemnify all host parents and members of their families, and all members, officers, directors, committee members, and employees of the host and sending Rotary clubs and districts, and of Rotary International, from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of any negligent act or omission, excepting gross negligence or intentional conduct, of any such persons or entities, which may be suffered or claimed by such applicant, parent, or guardian during, or as a result of, the participation by the applicant in such Youth Exchange program, including travel to and from the host country. As the undersigned parents or legal guardians of the applicant:

We have read and understood the Program Rules and Conditions of Exchange and agree to abide by them

We have read and understood the Statement of Conduct for Working with Youth and we understand that all Rotarians and host families are expected to have read and understood this statement.

We agree that the Applicant may travel to the Host District

Signatures of parents/guardians are not required if applicant is over 18 years of age

Signed (Applicant)	Signed (Father/Guardian)	Signed (Mother/Guardian)
Witness (Sending Rotary club representative)		Date (e.g., 01/Jan/2006)

SENDING CLUB and DISTRICT ENDORSEMENT

The Rotary Club and Rotary District specified within this section, having interviewed the applicant and his/her parents/legal guardians* and having reviewed the application, hereby endorse the student as qualified for Rotary Youth Exchange and recommend to hosting clubs and districts the acceptance of this student. The District agrees to provide adequate orientation to the student and parents* before the student's departure. *(delete if applicant over 18)

Sending District No.	Sending Club Name	Sending Club ID No.
Name of District Youth Exchange Chair	Name of Club President	Name of Club Secretary / YEO
Signature of District Youth Exchange Chair	Signature of Club President	Signature of Club Secretary/YEO
Date (e.g., 23/April/2010)	Date (e.g., 23/April/2010)	Date (e.g., 23/April/2010)



Rotary District
Short-Term Exchange Program
Guarantee Form

Applicant's Name ,

Full Legal Name as on passport or birth certificate (use capital letters for your FAMILY name; e.g., SMITH John David)			Name You Wish to be Called		Gender
Home Address - Street			Town/City	State/Province	Postal Code Country
Postal Address (if different) - Street			Town/City	State/Province	Postal Code Country
E-mail Address			Home Phone Number		Mobile Phone Number
Place of Birth (City, State/Province, Country)			Citizen of (Country)		Date of Birth (e.g., 23/April/2008) //

SENDING CLUB

Sending District No.		Sending Club Name		Sending Club ID No.	
Name of District Youth Exchange Chair		Name of Club President		Name of Club Secretary / YEO	

Alternative Emergency Contact for student in home country, OTHER THAN A PARENT/GUARDIAN

Name MICHEL, GUERRIN			Relationship Grand-father		
Address – Street 52 chemin de Ribotière		City Saint-Ismier	State/Province -	Postal Code 38330	Country France
E-mail Address michelguerrin39@gmail.com		Home Phone Number +33(0)	Business Phone Number +33(0)		Mobile Phone Number +33(0)621031469

HOST DISTRICT and CLUB GUARANTEE

The Rotary District, and Rotary Club where specified within this section, will provide room and board in approved homes, invite the applicant to participate in Rotary club and district events and activities typical of our country, and provide guidance and supervision to assure the applicant's welfare. The host Rotary District agrees to provide adequate training for host parents and Youth Exchange volunteers and orientation for the student upon his/her arrival.

Host Country		Host District No.		Host Club Name		Host Club ID No.	
Name of District Youth Exchange Chair		Name of Host Club President		Name of Host Club Secretary /YEO			
E-mail Address of District Youth Exchange Chair		E-mail Address of Host Club President		E-mail Address of Host Club Secretary/YEO			
Signature of District Youth Exchange Chair		Signature of Host Club President		Signature of Host Club Secretary/YEO			
Date	Home Phone Number	Date	Home Phone Number	Date	Home Phone Number	Date	Home Phone Number

HOST DISTRICT or CLUB COUNSELOR (Individual Exchanges only)

Name			E-mail Address		
Home Address - Street		Town/City	State/Province	Postal Code	Country
E-mail Address		Home Phone Number	Business Phone Number	Mobile Phone Number	

HOST FAMILY (if applicable?)

Name of Host Father		Host Father's E-mail Address		Business Phone		Mobile Phone	
Name of Host Mother		Host Mother's E-mail Address		Business Phone		Mobile Phone	
Home Address - Street		Town/City	State/Province	Postal Code	Country		
Home Phone Number		Names and Ages of any Other Adults in the Home					



Rotary District

Short-Term Exchange Program

Supplemental information about applicants for Youth Camps and Tours

Applicant's Name

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Applicant's Personal Background

Please answer the following questions:

What are your free time activities?

What are your school, college or university education attainments and vocation?

What are your special interests and accomplishments?

Do you have special skills?

Could you contribute to entertainment (e.g. play musical instrument etc.)?

What is the reason for your programme participation (e.g. choice of specific youth camp)?

Do you wish to exchange to a particular country? (Please state which country and whether you have any knowledge of it, have visited it before and the reason for your specific interest)

What are your future plans and goals?

Other personal remarks.