

Please SAVE this BLANK form to your computer before completing this document.

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|  | 2021 USA OUTBOUND IFYE REPRESENTATIVE APPLICATION - REFERENCES |
| | NAME STATE |

References must be individuals other than relatives. *NOTE: It is recommended that one reference be from a youth organization leader/advisor (extracurricular activities such as 4-H, FFA, university student group, etc.)*

Name:

Mailing Address: (Street/PO Box, City, State, Zip)

Phone (H) (W) (C)

Email Address:

Title/Relationship to Applicant:

Name:

Mailing Address: (Street/PO Box, City, State, Zip)

Phone (H) (W) (C)

Email Address:

Title/Relationship to Applicant:

Name:

Mailing Address: (Street/PO Box, City, State, Zip)

Phone (H) (W) (C)

Email Address:

Title/Relationship to Applicant:

I CERTIFY that all information on this reference sheet is true and complete to the best of my knowledge.

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

Applicant's Signature

Date

Upload COMPLETED form to #C-3 at <https://ifyeusa.org/foreign-exchange-program/become-participant.html>