

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

	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>