



**HOST FAMILY INFORMATION:** Has your family hosted an international participant?  
 YES NO

Country	Name of Program	Year

**EDUCATION:** Indicate the highest year you will have completed by the date you will be available for participation.

**Secondary:** List highest grade completed Date of completion (mm/yyyy)

**Post-Secondary:**

Name of School	Last Date attended	Degree(s) Received	Date(s) Received

**WORK EXPERIENCE:** Currently working? BRIEFLY Explain

**LANGUAGE ABILITY:**

*Other than English*) Please indicate: Excellent - Good - Fair - Poor - None

Language	Reading	Writing	Speaking	Comprehension	Years Study	Spoken at Home

Are you willing to study a language? YES NO

**TRAVEL EXPERIENCE OUTSIDE THE USA**

Country(ies)	Length of Stay	Dates	Purpose ( <i>tourist, exchange student, other</i> )

**LIST other international activities** in which you and your family have been involved (i.e. Cultural activities or host family experiences.)

**List interests/experiences** in areas such as: agriculture, agribusiness, water quality, ecology, forestry, and/or life and consumer science areas, etc. **Explain** the areas in which you have been involved, the extent and years of involvement.

**LEADERSHIP & RELATED EXPERIENCES:**

*(include your experiences in 4-H, church, school, university, other)*

Organization	Years of Membership	Leadership/Other Responsibilities

**What are your long-range goals?**

**LEISURE INTERESTS: (List)**

**SPECIAL STUDY INTEREST:** While abroad, you should continue to focus on your career interests, in addition to the cultural aspects of the exchange. Please describe your interest(s) (e.g., agriculture, economics, politics, environment, nutrition) – giving specific details.

**SMOKING/VAPING:**

Do you use tobacco/vaping in any form?

YES

NO

If yes, please explain:

Can you be placed with a smoking family?

YES

NO

**DIETARY RESTRICTIONS/ALLERGIES:**

Do you have any dietary restrictions or other allergies?

YES

NO

If yes, please list/explain.

**RELIGION:** (For information of host. If Protestant, give denomination.)

**GENERAL INFORMATION:**

Other information helpful in your placement with a program (Include special interests or medical considerations.)

**COUNTRY PREFERENCES:** 2023 Host Country Partners are subject to change:

Two-month program: June 19 - August 14, 2023. Three-month program: June 19 - September 7, 2022

Austria	Germany	South Korea
Costa Rica	Luxembourg	Sweden
Estonia	Norway	Switzerland
Finland	Slovenia	Taiwan

Three-month program: September 17 - December 10, 2023

Argentina	Costa Rica	Germany	India
Kenya	Morocco	Thailand	

NOTE: Applicants wishing to complete a two- or three-month program will live in one host country. Applicants desiring to complete a six-month program will live in two host countries (one in the summer choices and one in the fall choices). Changes in hosting timelines may be subject to change.

Please list a MAXIMUM of 6 choices indicated above – listing by number 1-6 with your first preference as number 1.

CHOICE	COUNTRY	CHOICE	COUNTRY
1		4	
2		5	
3		6	

**NOTE: Final placement will be determined with input from the IFYE applicant, the IFYE National Program Director, and the Host Country Coordinator.**

Earliest date you can depart. *(If after mid-June, please explain reason):*

**2023 PROGRAM FEE:**

- Participation fee is \$3,750 for the two- or three-month program. Participant fee is \$5,000 for the six-month program
- The program fee balance of payment method to be discussed individually with the National Program Director upon submission of application.
- Scholarships may be available through your state. Please check with National Program Director, Alan Lambert (alanelambert@ifyeusa.org) for this availability.

<b>2023 PROGRAM DATES:</b>	<b>Two Month</b>	<b>Three Month</b>	<b>Six Month</b>
National Orientation	June 14-19	June 14-19	June 14-19
Country Program(s)	June 19-August 14	June 19-Sept. 7	June 19-Dec.10
Country Program(s) Fall		Sept. 17-Dec. 10	
National De-Briefing	Sept. 12-15	Sept. 12-15	Dec. 10-13
National De-Briefing (Fall)		Dec. 10-13	

How did you learn about IFYE Exchange Program? *(Check all that apply.)*

Former Participant

National 4-H Congress

Cooperative Extension

Print Media (Please Specify)

Young Farmers and Ranchers

MANRRS

Social Media (Please Specify)

FFA

AFA Leaders (Agriculture Future America)

Other (Please Specify)

University

**I CERTIFY** that all information on this application is true and complete to the best of my knowledge. I understand the purposes and objectives of the IFYE program and agree to participate within the framework of the program for which I am accepted.

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

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Applicant's Signature

Date

**UPON COMPLETION, PLEASE SAVE IT TO YOUR COMPUTER.**

**UPLOAD THE COMPLETED APPLICATION to B-1 at**

**<https://ifyeusa.org/foreign-exchange-program/become-participant.html>**

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