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



Program for which applying: IFYE Representative (19 years and over):

2 months		3 months	6 mo	onths
				ns (photo, résumé, etc.) nt to continue and submit.
PERSONAL DATA: Are you a USA Citizen?	YES	NO		
Full Name: (First)	(Middle) (Las	Sex (N t) (As it appears on y	Л/F): our government ID)	
Preferred First Name:		Age:	Birthdate:	
Permanent Address: Street: City/State: Area Code/Phone: Cell: Email address:	Zip:	Current Add Street: City/State: Area Code/Ph Last date at th		Zip: Month/Day/Year
Emergency Contact: Phones: (H)	(C)	Relatio	onship: (W)	
Family: Father's Name: Occupation: Street: City/State: Phones: (H) (C) (W) Email address:	Zip:	Mother's Name Occupation: Street: City/State: Phones: (H) (C) (W) Email address:		Zip:
Siblings: Number of Brothers: Number of Sisters:	Age(s) of Brot Age(s) of Siste			

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

Country(ies)	Length of Stay	Dates	Purpose (tourist, exchange student, other)

TRAVEL EXPERIENCE OUTSIDE THE USA

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? If yes, please explain:	YES	NO
Can you be placed with a smoking family?	YES	NO
DIETARY RESTRICTIONS/ALLERGIES: Do you have any dietary restrictions or other allergies? If yes, please list/explain.	YES	NO

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.)

Two-month program: June 19	- August 14, 2023. Thre	e-month program: June	19 - September 7, 2023	
Austria	Latvia		South Korea	
Costa Rica	Luxembourg		Sweden	
Estonia	Norway		Switzerland	
Finland	Slovenia		Taiwan	
Germany				
Three-mon	th program: September	17 - December 10, 2023		
			- 41	
Argentina	Costa Rica	Germany	India	
Kenya	Morocco	Thailand		
NOTE: Applicants wishing to complete a two- or three-month program will live in one host countr				

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, 202

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	
2		5	
3		6	
0		Ŭ	

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 sixmonth 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, Melissa Haberstroh (mhaberstroh@ifyeusa.org) for this availability.

2023 PROGRAM DATES:	Two Month	Three Month	Six Month
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 National De-Briefing (Fall)	Sept. 12-15	Sept. 12-15 Dec. 10-13	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.

Applicant's Signature

Date

UPON COMPLETION, PLEASE SAVE IT TO YOUR COMPUTER. UPLOAD THE COMPLETED APPLICATION to C-1 at https://ifyeusa.org/foreign-exchange-program/become-participant.html