



PASADENA		SISTER		CITIES		COMMITTEE	
LUDWIGSHAFEN	MISHIMA	JÄRVENPÄÄ	VANADZOR	XICHENG	DAKAR-PLATEAU		
GERMANY	JAPAN	FINLAND	ARMENIA	CHINA	SENEGAL		
1948	1957	1983	1991	1999	2018		



STUDENT EXCHANGE APPLICATION

Please Type or Print Your Responses

Name _____ Gender(M/F) _____
(Last) (First) (Middle)

Birthdate _____ Birthplace _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____

Current School _____ Current GPA _____ Current Grade: _____

Academic or Vocational Goals: _____

What school or community activities are you involved in or members of: _____

Describe any work experience you have: _____

STUDENT EXCHANGE APPLICATION

What previous international living, travel, or study opportunities have you had? _____

Has our family ever hosted an international student in your home? If so, where was the student from and for how long did you host the student?

Would you/your family be willing to host an exchange student? _____

List the names of each member of your immediate family. Attached separate page if needed.

Name	Relationship	Occupation	Age

Please explain any dietary restrictions: _____

Do you drink alcoholic beverages? Please circle answer. Often Occasionally Never

Do you smoke? Please circle answer. Often Occasionally Never

STUDENT EXCHANGE APPLICATION

Do you have any health problems (including allergies) that might interfere with your participation in this exchange?

Please circle which country you would like to visit? **GERMANY; JAPAN; FINLAND; ARMENIA; CHINA; SENEGAL**

First Choice _____ Second Choice: _____ Third Choice: _____

What factors determined your first choice? _____

What languages do you speak other than English? _____

What is your level of Fluency and comprehension? Read, Write and Understand? _____

Please use this checklist to make sure that you submit all necessary information with your application!

1. Personal Statement. Explain on a separate page why you would like to represent Pasadena as an Exchange Student. Include in your statement what you would contribute to the experience and what you hope to gain from the experience.
2. Two Letters of Recommendation. One letter should be from a teacher or school administrator and the other may be from an employer or a community member.
3. Proof of U.S. Citizenship. You may provide a birth certificate, passport, or naturalization certificate. A passport will be required if you are selected for international travel.
4. School Transcript. Submit an informal copy of current grades from High School or College.

I affirm that I am a citizen of the United States. If you are naturalized, what date did you become a citizen?

COMMUNITY ENGAGEMENT COMMITMENT: If approved to participate in the Student Exchange program, I agree to volunteer or intern in the community for 10 hours upon my return and provide a written report outlining my experience. YES _____ NO _____

Please sign this application below and ask your parent or guardian to sign if required:

Applicant's Signature: _____ Date _____

STUDENT EXCHANGE APPLICATION

PARENT APPROVAL

Parents' or Guardian's Signature(s) (Signatures of both parents are required if you are not 18 years old.)

I have read this application and confirm and approve that the information is accurate.

FATHER OR GUARDIAN

Name _____ Signature _____ Date _____

Address _____

Email _____

Home Telephone _____ Cell Phone _____

MOTHER OR GUARDIAN

Name _____ Signature _____ Date _____

Address _____

Email _____

Home Telephone _____ Cell Phone _____