

Mercer Island Sister City Association  
Student Exchange Program Application  
Mid-Winter Break Trip -February 17-26, 2023

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
School Name \_\_\_\_\_ Grade \_\_\_\_\_  
Foreign Language Experience/Education, years of study \_\_\_\_\_

Family Information

Father \_\_\_\_\_ Occupation \_\_\_\_\_  
Address (if different) \_\_\_\_\_ Home Phone \_\_\_\_\_  
Cell \_\_\_\_\_ Work \_\_\_\_\_ E-mail \_\_\_\_\_  
Mother \_\_\_\_\_ Occupation \_\_\_\_\_  
Address (if different) \_\_\_\_\_ Home Phone \_\_\_\_\_  
Cell \_\_\_\_\_ Work \_\_\_\_\_ E-mail \_\_\_\_\_  
Siblings Names & Ages \_\_\_\_\_

**Do you have a passport valid until at least August 31, 2023?** \_\_\_\_\_

Describe any and all medical conditions that may affect your well-being during this trip:

\_\_\_\_\_

Medications presently taking/Condition(s): \_\_\_\_\_

Special Needs: \_\_\_\_\_

(Attach another sheet if necessary.)

The second half of this exchange program requires your family to host your corresponding exchange student in your home during October, 2023. What activities would you likely do together during that time? \_\_\_\_\_

\_\_\_\_\_

List some of your hobbies/interests/activities (school and community): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you are selected, you will spend time in an environment where customs are quite different, the people may speak little English, and the food may be unfamiliar. How will you cope with these differences?

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Religious Affiliation (optional)\_\_\_\_\_. Would your religion impose any limitations or concerns for you? Please explain:\_\_\_\_\_

Do you have any dietary restrictions? \_\_\_\_\_ If so, please explain: \_\_\_\_\_

Are you a smoker? \_\_\_\_\_ Would you accept a family with a smoker(s)? \_\_\_\_\_

Do you have a pet(s)? \_\_\_\_\_ Would you accept a family with pets?\_\_\_\_\_

**Please attach a paragraph on a separate sheet**, explaining why you want to be part of this exchange and represent our city in Thonon. Also, list below any other information you feel is relevant for you and/or your host family:

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**PLEASE NOTE! I understand that to participate in the exchange:**

- I will commit to hosting my exchange partner on Mercer Island in October 2023;
- My family will purchase a two-year membership to the Mercer Island Sister City Assn.;
- I and/or my family agree to help with MISCA events during the upcoming year and during the exchange visit of the French students to our city.

Student Signature \_\_\_\_\_ Dated \_\_\_\_\_

Parent’s Signature \_\_\_\_\_ Dated \_\_\_\_\_

**APPLICATION DEADLINE IS FRIDAY, NOVEMBER 11, 2022**

**BON COURAGE!** Turn in the **completed application**, a **small photo** of yourself along with the attached **student interest statement** and **two letters of recommendation** from a teacher, family friend or other adult who knows you well to: Your French Teacher



*For questions or concerns, contact:*

*Linda Todd: 206-300-8518*

*Monica Howell: 206-321-2200*