



Reciprocal Student Exchange with Antibes, France

US to France – February 22 to March 3, 2017

France to US – April 17 to April 27, 2017

Part A– Information and Instructions

Dear Interested Student and Parents,

We are excited to share with you the information about the Newport Beach Sister City Antibes Student Exchange Program. The exchange program provides participants the opportunity to experience the culture and people of France on a very personal level.

Students who are selected for the program will live with a French family who has a son or daughter of the same age as well as see many French cultural sites. During the exchange trip students will visit their French counterpart's school and participate in other activities along with sightseeing and cultural activities. This is a unique opportunity to visit and learn about a different culture and make lifelong friends.

Then in April, the participant will welcome his or her French student counterpart to their home in the Newport Beach area to show them what life in the U.S is all about.

Frequently Asked Questions:

Dates: The actual exchange dates will be set in 2016. Traditionally, the exchange occurs during the following time period.

Newport Beach to Antibes – February, Winter Break

Antibes to Newport Beach – April, Spring Break

What is this Student Exchange all about and who can go?

This program is for ten (10) current high school students to visit Antibes in February and to stay with a French student and his or her family. The students must attend a local public or private school in Newport Beach that will allow French student to shadow the Newport Beach student at their school. There are no exceptions to this rule.

In April, the French students will visit Newport Beach and stay with the families of the students who visited Antibes in February.. The length of their visit to Newport Beach is about a week.

Who is organizing the Exchange?

For over three decades, the Sister City exchanges have been a collaborative effort of the Newport Beach Sister City Association (NBSCA) and with great support of the Newport-Mesa Unified School District.

The NBSCA organizes the trip and stay with the host families in Antibes.

Students must apply online application or submit a written application.

The application deadline is December 12, 2016.

Candidates will be interviewed and selected on December 17, 2016.

What are the selection criteria?

The selected students are ambassadors representing their school, Newport Beach, California, the USA, and above all, their families and themselves. To qualify applicants should meet the following criteria at a minimum for consideration:

- Demonstrate proper manners and respect.
- Be able to make good decisions and be self-directed so that your actions always represent the highest quality of integrity, diplomacy and judgment.
- Demonstrate good academic performance.
- Be articulate and thoughtful.
- Exemplify the qualities of leadership – a leader knows how to lead and follow.
- Friendly with others.
- Show a real effort and interest in learning about France, its geography and culture.
- Demonstrate an awareness and respect for the cultural differences between France and the United States.

Lastly, you and your family must serve as host to your French “buddy” in April. You also must participate in events that are scheduled for the exchange students (American and French).

Applicants will need to complete the Student Application Form and participate in a personal interview with the selection committee.

How do I sign up to go to France?

The Application Package consists of the following required forms:

- Part A – Information and Instructions
- Part B – Student Application Form
- Part C – Parent Application Form
- Part D – The Statement of Intent and Medical Form

Complete all forms and submit them via e-mail in PDF format if possible. Signature pages with original signatures need to be brought to the interview. If you are unable to scan in documents, please let us know at ourjanuary@att.net .

Follow the steps below:

1. **Review Part A and familiarize yourself with the procedures**
2. **Complete Part B - Student Application Form, including the essay: “Why I Think I Will Be a Good Ambassador to Antibes”.**
3. **Have your parents complete Part C - Parent Application Form and Part D – Statement of Intent and Medical Form**
4. **Submit all documents to ourjanuary@att.net**

**Deadline for submittal of your Application Package:
December 12, 2016**

Applications that are not complete with all forms and signatures will not be considered.

What happens once I submitted my application?

Within approximately one (1) week from your submittal of the Application Package, you will be asked to participate in an interview. Based on your application and the interview, the selection committee will select students that will be part of the Student Exchange to go to France.

What is next if I am selected to go to France?

Together with the other selected students and two chaperones you will meet with members of the NBSCA on several occasions to prepare you for your trip to France and discuss travel arrangements.

How does the Exchange work?

In February the selected exchange students and chaperones will go to Antibes for ten days. During your time in France, you will be staying with a French family in Antibes and go to school with your French exchange student counterpart. While in Antibes, you will officially represent Newport Beach at various formal meetings with French officials.

In April, you will reciprocate and you will host your French counterpart in your home. The program will require you to accompany your French buddy during school days and participate in formal and informal events. You will be required to accompany your French buddy to all events.

How much does it cost?

Each selected student assumes the cost for airfare to and from France and spending money. Airfare has typically been approximately \$1,000, however airfare costs can change. Cost for incidental expenses (host family gifts, souvenirs etc.) are about \$250.

Each selected student will host the “buddy” student from Antibes. You and your family will be responsible for expenses associated with hosting your “buddy student” in your home for approximately 10 days and to include the “buddy” student in your family activities. Prior student activities have included Disneyland, meals out, transportation costs.

If you or your parents have any questions, please do not hesitate to email ourjanuary@att.net

Remember, submittal deadline December 12, 2016.

Merci et bonne chance!

Part B – Student Application Form

This application should be typewritten in Word format.

Complete all the information and email this form to ourjanuary@att.net

Submission Deadline is: December 12, 2016

General Information

Name:

Date of Birth: Sex:

School: Grade: GPA:

Home Address:

Street:

City: State: Zip Code:

Home Phone: Cell Phone:

Primary Language at Home:

What other languages, if any, are spoken at home:

What other language(s) do you speak?

Individual Information (limit your answers to one or two paragraphs)

Tell us about your interests, hobbies, sports and other activities:

Tell us about your family:

What do you like or dislike about school?

Tell us about any other likes or dislikes that you have that would be important to know if you were selected:

Signature of Student Applicant: _____

Printed Name: _____ Dated: _____

Essay

Tell us why you think you will be a good ambassador to Antibes, France. You should write your essay by yourself and it can be as long or short as you decide.

Part C - Parent Application Form

Instructions

The Newport Beach Sister City Association appreciates your interest in hosting an exchange student and we are confident that this will be a truly rewarding experience for your family. The US Department of State and Department of Homeland security require that we obtain the information below for all potential host families. The information below will be treated confidentially.

All adults with whom the exchange student from Antibes might stay with (for example, father, mother, stepparents, grandparents, guardians, divorced spouses, grandparents, adult children at home or other adults living in the home) must complete this form.

Complete this form and send a copy in PDF format to ourjanuary@att.net .

Submission Deadline is December 12, 2016

Interviews will be held December 17, 2016

Student Applicant's Information

Name:

Date of Birth: Sex:

School: Grade:

Parent Information

Adult 1

Full Name (Last, First, Middle):

Relationship to Student Applicant:

Date of Birth: Country of Birth:

Residence Address:

Street:

City: State: Zip Code:

Email Address:

Home Phone: Cell Phone:

Business Phone:

Driver's License Number: State of Issuance:

Employer:

Occupation:

Adult 2

Full Name (Last, First, Middle):

Relationship to Student Applicant:

Date of Birth: Country of Birth:

Residence Address:

Street:

City: State: Zip Code:

Email Address:

Home Phone: Cell Phone:

Business Phone:

Driver's License Number: State of Issuance:

Employer:

Occupation:

Additional adults should be included on a separate copy of this form.

Provide for each family member or other persons living with you the following information:

Name: Sex: Age: Relationship:

Name: Sex: Age: Relationship:

Name: Sex: Age: Relationship:

Name: Sex: Age: Relationship:

Family Information

Family hobbies or special interests:

Pets at home: Y/N How many:

What kinds of pets:

Will the French exchange student share a bedroom? Y/N

If so, with whom?

Do you have friends or neighbors with other high school aged children?

Have you had any hosting experiences in the past? If so please provide a brief description:

Will your son or daughter stay with any other family while the French exchange student is here in Newport Beach? If so, please provide brief details.

Personal References

Please provide two personal references

Reference 1

Name: Relationship to you:

Address:

Street:

City: State: Zip Code:

Home or Cell Phone: Business Phone:

Email:

Reference 2

Name: Relationship to you:

Address:

Street:

City: State: Zip Code:

Home or Cell Phone: Business Phone:

Email:

Waiver, Consent and Release

I certify that all of the statements in this application, and any attachments hereto, are true and correct to the best of my knowledge. I also certify that I have not withheld any information that would affect this application unfavorably, if disclosed. I understand that any omission of facts or misrepresentations will result in my son's or daughter's elimination from consideration for participation in the Newport Beach Sister City Student Exchange Program. I further certify that I understand that the Newport Beach Sister City Association's (NBSCA) intent is to deny a position to anyone convicted of a crime of violence or a crime against another person.

I hereby give my permission to the NBSCA to investigate, verify and obtain information given in this application, including search of law enforcement and published records (including driving records and criminal background checks), contact with employers and reference interviews. I understand that this information will be used, in part, to determine my eligibility for hosting an exchange student as part of the Newport Beach Sister City Student Exchange Program. I understand that I will have an opportunity to review the records and that there is a procedure available for clarification, if I dispute the record as received.

I specifically acknowledge that the NBSCA or its affiliates will inquire about, and I authorize them to verify, my employment, experience, personal references, background, including criminal background checks that may contain arrest and conviction data. I waive any right to assert that such an investigation or request constitutes an invasion of my privacy. I recognize that such inquiries are in the interest of all personal involved in the Newport Beach Sister City Student Exchange Program and I fully consent to such investigations.

IN CONSIDERATION of my acceptance and participation in the Newport Beach Sister City Student Exchange Program, I, to the full extent permitted by law, hereby release and agree to save, hold harmless and indemnify, all members, officers, directors, committee members and employees of the participating entities, including but not limited to, NBSCA, the City of Newport Beach, the Newport-Mesa Unified School District, from any or all liability for any loss, property damage, personal injury or death, including any liability which may arise out of the negligence of any of the Indemnities, which may be suffered or claimed by me as a result of an investigation of my background in connection with this affidavit.

I further agree to conform to the rules, regulations and policies of the NBSCA and its affiliates and understand that my service can be modified or terminated, with or without notice or cause, at any time, at the option of either the NBSCA or its affiliates, or at my option. I understand and agree that the NBSCA or its affiliates may, in their sole discretion, decline to accept my application for volunteer services with or without cause.

If accepted as a host family, I/we agree to treat the visiting exchange student as our own son or daughter, and to provide appropriate supervision to him or her.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE APPLICATION, WAIVER, CONSENT AND RELEASE AND THAT I SIGN THIS FORM VOLUNTARILY.

Signature of Father/Guardian: _____
Printed Name: _____ Dated: _____

Signature of Mother/Guardian: _____
Printed Name: _____ Dated: _____

Part D - Statement of Intent

The Application Forms Parts B and C are only valid once the original signed Part D Statement is received.

Submittal Deadline: December 12, 2016

Student's Name: _____

With my signature below, I hereby acknowledge that:

I, the parent/guardian of the above named student applicant, am interested in my above named son/daughter being considered for the reciprocal student exchange program between the cities of Newport Beach, CA and Antibes, France.

My son/daughter is interested in participating in the Newport Beach Sister City Antibes Exchange Program.

If selected, my son/daughter and I, as the parent, will agree to the terms and conditions as set forth by the NBSCA.

If my son/daughter is selected, I will pay for the round trip airfare to France.

If my son/daughter is selected, I will host a French exchange student as part of our family.

If selected, my son/daughter will shadow the French exchange student and will spend time with him/her. Further, I agree that if selected my son/daughter will participate **without exception** in required activities that the NBSCA is organizing for **all** the exchange students, even if this means that our son/ daughter will have to miss classes or tests and will have to make them up a later date. The NBSCA will arrange the excuses with the appropriate school administrations.

If selected, my son/daughter and I agree that our son/daughter will serve, if called upon, as an ambassador of the NBSCA on future events. Such events could be recruiting appearances at schools, City Council meetings, participation at parades, etc.

Furthermore, I also acknowledge that I have read and reviewed:

- Part A – Information and Instructions
- Part B – Student Application Form
- Part C – Parent Application Form
- Part D – The Statement of Intent Form

I further acknowledge that the above forms are complete and correct.

Medical Information:

All delegates (students and teachers) will procure medical travel insurance from Sister City International for the period of the trip to France. Parents will be responsible for the cost of the medical travel insurance. Approximate cost of insurance for 10 days is \$30.00.

Please indicate below whether your son/daughter is on any prescription medication that he/she will be taking while staying in France.

Name of Prescription Drug(s):

Dosage and Frequency of Consumption:

Is your son or daughter able to administer the drug by him or herself: Y/ N

Please indicate whether your son/daughter has any allergies/adverse reaction, such as to bee stings, penicillin, milk/milk products that need any medical attention.

Allergic/Adverse reaction:

What is the typical treatment?

Is your son or daughter traveling with the necessary medications listed if at all above? Y/ N

Signature of Father/Guardian: _____ Printed Name: _____ Dated: _____

Signature of Mother/Guardian: _____ Printed Name: _____ Dated: _____
