

# Rotary District 2452 RY 2018-2019

New Generations Service Exchange Program

Before you begin your application, please read the program instructions pages 6-9.

### 1. Program Information

This application refers to the RI District 2452 New Generations Service Exchange –NGSE Program. Please to read the "guidelines" and other documents related to it.

# 2. Applicant Information

#### Smile!

Attach or insert a recent, good quality color photo of yourself

(Head and shoulders). Original photos must accompany all sets of the application.

Attach photo with glue or doublesided tape; do not staple. Passport Size

				🗌 Male	🗌 Female
Full Legal Name as on passport or birth	certificate - use capital letters for FAMI	LY name Name ye	ou wish to be called		
Date of Birth (e.g. 23 April 1999)	Citizen of (Country)	Place of Birth (City	y, State, Country)		
Home Address - Street	Town/City	State/Province	Postal Code	Country	
E-Mail Address	Home P	hone Number	[ob	ile Phone Number	

Member of INTERACT CLUB / ROTARACT CLUB / other contact with ROTARY and/or other Service organization

# 3. Contact Person in the event of an emergency

Full legal name as on Passport, use capital letters for FAMILY NAME		Relationshi	Relationship		
Home address – street	Town / City	State	Postcode	Country	
E-Mail address		Home Phor	ne Number	Mobile Phone Number	
4. Sponsoring Distric	t and Club Contact	ts			
Sponsoring District Number 2452 Name of Sponsoring NGSE		SE District Chair/Mem	ber	E-Mail Address	
Address - Street	Town / City		State/Province 1	Postcode Country	

Home Phone Number

Business Phone Number

Mobile Phone Number

Sponsoring Rotary Club	Name of Sponsoring Rotary Club Youth	h Exchange Officer E-Mail A	Address	
Address - Street	Town / City	State/Province Pos	stcode	Country
Home Phone Number	Business Phone Number	Mobile Pho Applicant's Name	one Number	
Period of Exchange		Length of Exchange	One week	

# 5. Personal Background

Religion	Do you have any special requirements regarding religious observance? Please detail.
□ Yes □ No	
Do you smoke or use tobacco products?	If yes, please explain
Tyes No	
Do you drink alcohol?	If yes, please explain
Tyes No	
Have you ever used illegal drugs? If yes, please explain	
Answering yes to any of these questions country.	will not necessarily eliminate you as a candidate; however, special consideration may be required with regards to host family or host
Yes No	
Do you have a driver's license?	If yes, please explain

## 6. Languages

Your native Language		<b>Proficiency in Non-Native Language(s)</b> (indicate Poor, Fair, Good, or Fluent)		
Non-Native Language(s)	Years Studied	Speaking	Reading	Writing



### Applicant's Name

# 7. Health Information

Do you have any mental health/medical/dental condition?	□ Yes	□ No				
Have you been treated for mental health/medical conditions in the past two years?	□ Yes	□ No				
Have you taken any prescribed medications in the past six months?	□ Yes	□ No				
Do you have any special health requirements (disabilities, allergies, etc.)?	□ Yes	□ No				
If you have answered 'YES' to any of the above please explain fully in the space below providing as much information as possible, including the name of any medication and the reason prescribed an include a copy of the doctor's prescription. Use additional sheets of paper if necessary.						



# **Rotary District 2452**

# <u>New Generations Service Exchange Program</u>

**Applicant's Personal Background – Supplementary Information** 

# 8. Individual Exchange / Internship Information

Career Objective – your achievements through the Rotary New Generations Service Exchange

Education

**Work Experience** 

Additional Skills

**Special Interests / Remarks** 



#### Applicant's Name

Date of Exchange	Length of Exchange	One week.
Country to visit		

### Applicant's Name Rotary District 2452

# **New Generations Service Exchange Program**

# **Applicant's Personal Background – Supplementary Information**

### 9. Group NG Service Exchange

What do you want to achieve through the Rotary New Generations Service Exchange?

What are your school, university educational or vocational goals?

What are your special interests and accomplishments?

Do you have special skills?

What are your freetime activities? Remarks

Date of Exchange	Length of Exchange	One week
Country to visit		

#### Applicant's Name Rotary District 2452 – RY 2018-2019

# **New Generations Service Exchange Program**

#### Rules and Conditions of Exchange, Permissions and Declarations

As a New Generations Service Exchange Program participant supported by a Rotary club or district, you must agree to the following rules and conditions of exchange. Violation of any of these rules may result in dismissal from the program and immediate return home, at your expense. Please note that districts may edit this document or insert additional rules if needed to account for local conditions.

### **Rules and Conditions of Exchange**

1. You must obey the laws of the host country. If found guilty of violating any law, you can expect no assistance from your sponsors or native country. You must return home at your own expense as soon as released by authorities.

2. You will be under the host country's authority while you are an exchange program participant and must abide by the rules and conditions of exchange provided by the host country. Any relatives you may have in the host country will have no authority over you while you are in the program.

 You are not allowed to possess or use illegal drugs. Medicine prescribed to you by a physician is allowed.
You must have travel insurance that provides coverage for accidental injury and illness, third party liability, death benefits (including repatriation of remains), disability/dismemberment benefits, emergency medical evacuation, emergency visitation expenses, 24-hour emergency assistance services, and legal services, in amounts satisfactory to the host Rotary club or country, with coverage from the time of your departure from your home country until your return.

5. You must purchase return travel ticket before departure from the home country.

6. You must attend all orientations and trainings offered by the Sponsoring clubs or countries.

7. You must have sufficient financial support to assure your well-being during your exchange.

8. The host country and club, host family must approve any other travel in writing, exempting Rotary District 2452 of responsibility and liability.

9. Any costs related to an early return home or any other unusual costs (language tutoring, tours, etc.) are your responsibility.

10. You should communicate with your host family, if applicable, prior to leaving your home country. The family's information must be provided to you by your host club or district prior to your departure.

11. Talk with a Rotarian or other trusted adult if you encounter any form of abuse or harassment.

### **Recommendations for a Successful Exchange**

1. Smoking is discouraged. If you state in your application that you do not smoke, you will be held to that position throughout your exchange.

2. If placed in a host family, respect your host's wishes. Become an integral part of the family, assuming duties and responsibilities normal for a person of your age or for children in the family. 3. Attend Rotary-sponsored events and, if living with a family, host family events, and show an interest in these activities. Volunteer to be involved - do not wait to be asked.

4. If you are offered an opportunity to go on a trip or attend an event, make sure you understand any costs you must pay and your responsibilities before you go.

### Permission for Medical Care and Release from Liability

I, the applicant, do release from liability and grant permission as noted of the following while I am participating as a New Generations Service Exchange program participant:

-In the event of accident or sickness, I authorize any Rotarian, authorized chaperones of Rotary activities, and/or host parent(s) of the student to select the appropriate medical facility and physician(s)/dentist(s) to provide treatment.

-I give permission for any operation, administration of anesthetic, or blood transfusion that a medical practitioner may deem necessary or advisable.

-I further consent to any medical or surgical treatment by a licensed physician, surgeon, or dentist that might be required for any emergency situation.

-I agree to hold harmless Rotary International, Rotary District 2452 or any Rotary Club, Rotarian, Rotary chaperone, or host family for any intervention in an emergency situation regardless of final outcome.

-I agree to assume all financial obligations beyond those covered by insurance for any medical treatment rendered.

Signed Applicant

Signed Witness (Rotary Club representative)

Date (dd.mm.yyyy)

### **Applicant's Declaration**

**IN CONSIDERATION** of the acceptance and participation of the applicant in this program, the undersigned APPLICANT to the full extent permitted by law, hereby releases and agrees to defend, hold harmless, and indemnify all host parents and members of their families, and all members, officers, directors, committee members, and employees of the host and sponsor Rotary clubs and district 2452, and of Rotary International, from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of any negligent act or omission, excepting gross negligence or intentional conduct, of any such persons or entities, which may be suffered or claimed by such applicant, parent, or guardian during, or as a result of, the participation by the applicant in such NG Service Exchange \_NGSE program, including travel to and from the host country.

As the undersigned applicant I declare that:-,

- I have read and understood the Program Rules and Conditions of Exchange \_NGSE and agree to abide by these rules and others imposed on me with due notice during my time as an exchange participant in the host country.
- I am in good health and as a New Generations Service Exchange \_NGSE participant understand the importance of the role of an "ambassador" and, should I be chosen to represent my Sponsoring Rotary club and Country, school, community and state/province, will, to the best of my ability, maintain the high standards required. I further state that all the details entered by me in this application and the attached documents are true and accurate to the best of my knowledge.
- I purchase round-trip air travel before I depart my home country;
- I attend all orientations and trainings offered by my sponsor and host countries and clubs, and return home after completion of my exchange.

Signed Applicant

Signed Witness (Rotary Club representative)

Date (dd.mm.yyyy)

## Alternative Emergency Contact in home country, OTHER THAN A PARENT

Name				
Home Address – Street	Town/City	State/Province	Postal Code	Country
E-Mail Address	Home Phone Number	Business Phone Number	Mobile Phone N	umber

### **Sponsoring Club and District 2452 Endorsement**

The Rotary Club and Rotary District 2452 specified within this section, having interviewed the applicant and having reviewed the application, hereby endorse the participant as qualified for New Generations Service Exchange and recommend to hosting clubs and countries the acceptance of this applicant. The District agrees to provide adequate orientation to the applicant before departure.

Sponsoring District No.2452	Sponsoring Club Name	Sponsoring Club ID No.
Name of District NGSE Chair	Name of Club President	Name of Club
Signature of District NGSE Chair	Signature of Club President	Signature of Club Secretary
Date (dd.mm.yyyy)	Date (dd.mm.yyyy)	Date (dd.mm.yyyy)



# Rotary District 2452 - RY 2018-2019

# **New Generations Service Exchange Program**

#### **Applicant's full Name:**

#### **Guarantee Form**

				□ Male	🗌 Female
Full Legal Name as on passport or birth certificate (use capital letters for your FAMILY name		) Nam	e you wish to be called		
Date of Birth (e.g. 23 April 1999)	Citizen of (Country)	Place of Birth (C	ity, State, Country)		
Home Address – Street	Town/City	State/Province	Postal Code	Country	
E-Mail Address	 Home Phone Nu	mber	Mobil	e Phone Number	

### Host Country and Club/s

We, the Host Rotary Club/s and Country will provide room and board in approved homes, invite the applicant to participate in Rotary club, country and district events and activities typical of our country, and provide guidance and supervision to assure the applicant's welfare. The host Rotary District agrees to provide adequate training for host parents and NGS Exchange Rotarians and Rotaractors volunteers and orientation for the participant upon his/her arrival. (*If applicable for this exchange*)

Host Country	. Host Club Name	Host Club ID No.
Name of District NGSE Chair	Name of Club President	Name of Club NGSE Officer (if applicable)
E-Mail Address of District NGSE Chair	E-Mail Address of Club Presi	dent E-Mail Address of Club NGSE Officer
Signature/Date	Signature/Date	Signature/Date

### **Club Counselor**

Name		E-Mail Adress			
Home Address – Street	Town/City	State/Province	Postal Code	Country	
E-Mail Address	Home Pl	hone Number	Mot	vile Phone Number	



Host Family (if applicable)

Host Father's E-Mail Address		hone	Mobile Phone	
Host Mother's E-Mail Address			Mobile Phone	
Town/City	State/Province	Postal Code	Country	
	Host Mother's E-Mail Address	Host Mother's E-Mail Address	Host Mother's E-Mail Address	

Names and Ages of any other Adults in the Home

		1	1		5	-
NGSE -		Shawkat				
District Chair	DGE	Tadros	JORDAN	Amman	shawkat tadros@hotmail.com	96265677666
NGSE - District						
Vice Chair	PP	Ziad Chahine	LEBANON	Batroun	ziad.zucami@hotmail.com	96176194242
NGSE -		Mazen Al				
Member	DGN	Omran	BAHRAIN	Manama	mazen@mazenalumran.com	97339555552
		Ramy		Amman		
NGSE-Jordan	РР	Sha'ban	JORDAN	Citadel	wrift@orange.jo	96265630419
		Ramzi		Amman		962
NGSE-Jordan	РР	Mushahwar	JORDAN	Jerash	ramzi.mushahwar@gmail.com	796457700
				Beirut		
NGSE-		Celine		Metropolita		
Lebanon	RTN	Moawad	LEBANON	n	celine.moawad@yahoo.com	9613760099
NGSE-RAC		Joseph		RAC LAU-		
Coordinator	RAC	Haddad	LEBANON	Byblos	Joseph.elhaddad01@lau.edu	96170181555

#### District 2452 Committee for NGSE Program - RY 2018-2019

<b>District Governor</b>	Michel				
2452	Jazzar	LEBANON	Kesrouan	dg1819micheljazzar@gmail.com	9613225525

Signed Applicant

Signed Witness (Rotary Club representative)

Date (dd.mm.yyyy)