

**BACKGROUND INFORMATION**

Name: \_\_\_\_\_

Grade: \_\_\_\_ Address: \_\_\_\_\_

Tel: \_\_\_\_\_ e-mail: \_\_\_\_\_

Facebook: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

**All afternoon classes for the Exchange are mandatory.**

**Please read carefully:**

- I have to attend all afternoon classes unless I am ill and I have a doctor’s excuse the day I return or I am participating in game or game related activity.
- The exchange trip is a high school course for academic credit. It is NOT a vacation! This is an academic home stay program; school will be attended in Italy. I need to make up all missed work within 10 days after return from trip.
- It is my responsibility to make payments on time (down payment, airline ticket, insurance), to obtain a passport and ATM card, to purchase a host family gift, **and to participate successfully in ALL fundraisers** (Bake-sales, Lock-ins, Wal-Mart Raffle, Community donations, presentations and others). Difference of funds not raised needs to be paid in full before trip.
- I understand that all school and exchange rules are in effect 24/7 (including when Italians are here at HHS) and that I will be sent home at my parents’ expense if I should violate these rules. I understand that my parents I and need to sign and have notarized waiver by Hampshire Co. BOE.
- I will likely wish to have spending money for gifts and personal purchases while overseas. When traveling, I am responsible for most of my own lunches.
- I need to have a Facebook account for communication

\_\_\_\_\_  
Student signature                      Parent Signature

*Please ask a Guidance Counselor to fill in this part of the application. Initials and signatures are necessary.  
Please attach WESTEST scores.*

**→ Return in Folder by February 27, 2015.**

**GPA 2013/2014:** \_\_\_\_\_ Initials: \_\_\_\_\_

Days absent (‘13/’14): \_\_\_\_\_ Initials: \_\_\_\_\_

ASD? OSD? Bus? (Please circle if applicable)

Unexcused absences: \_\_\_\_\_

Signature: \_\_\_\_\_

**GPA 2014/2015:** \_\_\_\_\_ Initials: \_\_\_\_\_  
**(1<sup>st</sup> semester)**

Days absent (‘14/’15): \_\_\_\_\_ Initials: \_\_\_\_\_

ASD? OSD? Bus? (Please circle if applicable)

Unexcused absences: \_\_\_\_\_

Signature: \_\_\_\_\_

**The following part needs to be filled out by an administrator or counselor:**

Would you recommend this student to be a part of the Italian Exchange program representing HHS abroad? Why or why not? Please explain and be specific:

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\_\_\_\_\_  
Signature    Date