

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, Chocolate & Donut Sales, 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 personal Facebook account, WhatsApp, Telegram and other Apps for communication and a deactivated phone for trip.
- _____ I will have exemption next school year (please check if yes)

Student Signature

Parent Signature

1/05/20

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

Please attach PSAT scores.

→ Return in aFolder by January 23, 2020.

GPA 2018/2019: _____ Initials: _____

Days absent ('18/'19): _____ Initials: _____

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

Unexcused absences: _____

Signature: _____

GPA 2019/2020: _____ Initials: _____
(1st semester)

Days absent ('18/'19): _____ 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.

Signature

Date

