



APPLICATION FOR EXCHANGE reciprocal – PROVINCE.....

France or Belgium Spain
 11 weeks 9 weeks 6 weeks (Ontario only) 1 month (summer)

Given Names: **Last Name:**
(As appears on your passport)
Sex: F M **Date of Birth:** D...../ M...../ Y..... **Height (ft):** **Weight (lbs):**.....

School District **Grade:**

I prefer to be matched with a: M F Either

Address :
 City: Province: Postal Code:
 Home Telephone: Parent's cell phone(s):
 Parent's email:
 Student's email: Student's cell phone:

Describe your environment: Large city Small city Suburb Rural area
 What kind of home do you live in? House Townhouse Apartment
 Will your partner have his/her own room? Yes No Will share with:
 Do you smoke? No Yes Smokers in the home? No Yes Who?

Sister(s): Given Name, Age(s):
 Brother(s): Given Name, Age(s):
 Other people living in the home:

Do you have a medical condition? No Yes (please explain):
 Do you suffer from any allergies? No Yes (please explain):
 Are you on a special diet? No Yes (please explain):
 Do you have any pets at home? No Yes (describe):

Describe yourself: Social Energetic Musical Calm Outgoing
 Academic Athletic Artistic Reserved Shy

Do you belong to a sports team /club? No Yes (explain)? Can you swim No Yes
 Sports practised occasionally How many hours per week?
 I play the following musical instruments: Music Lessons: No Yes
 Number of hours per week:
 The following musical instruments would be available for my partner at home:

Time spent: (Hours per week): Playing Sports: With Friends: Listening to/Playing Music:
 On the Computer: On the Phone: Watching TV: Reading: Doing Homework:

Alone, my hobbies/Pastimes/Interests include the following in order of priority:

1. 2. 3.

With family/friends, my hobbies/Pastimes/Interests include the following in order of priority:

1. 2. 3.

SCHOOL INFORMATION (School attended during the exchange)

Name of school: Grade:

Address:

Telephone number: Website:

Principal's Name: Principal's email address:

Method of transportation used to get to school:

OSEF Coordinator's Name:..... Email:.....

FAMILY INFORMATION

Father's First and Last name: Father's occupation:

Mother's First and Last name: Mother's occupation:

DIVORCED PARENTS or CUSTODY OF THE CHILD BY A LEGAL GUARDIAN

Please indicate the address and information of the legal guardian who will have the custody of the exchange partner

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In the family file, you will have to explain in details how custody will be shared during the exchange student's visit.

DEPARTURE/RETURN INFORMATION

From which airport do you wish to travel? :

- Halifax, NS Charlottetown, PEI Fredericton, NB Moncton Ottawa Toronto, ON
- Winnipeg, MB Regina, SK Saskatoon, SK Edmonton, AB Grande Prairie Calgary, AB
- Vancouver, BC Victoria, BC Kamloops Kelowna Other:.....

No changes will be allowed once you have selected your departure/return airport and an add-on fare may be charged for other departure cities.

IMPORTANT: Please note that upon arrival in Paris, your child may be subject to an additional flight or ride to his/her final destination. Travel by train will be chaperoned by an OSEF representative. Internal flights however will NOT be chaperoned.

Date of application:

Student's signature:

Parent or Legal Guardian's signature