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| **YEAR:** **2024** |  |  |

***NEW ZEALAND/GERMAN******STUDENT EXCHANGE***

**Read these instructions carefully before completing your application!**

**Please complete your application using the word version of the form and then save as a pdf before you send it to the Exchange Organiser.**

These forms will be sent to your host family in Germany, so care must be taken with addresses, telephone numbers and email addresses to ensure contact details are correct.

Incomplete applications will be returned to the applicant to be completed correctly – this will cause delays in your application.

A current **email address** for you, the applicant, and one for your parent(s)/legal guardian(s) must be included. Most correspondence from the Exchange Organiser will be sent to these email addresses, so ensure these are correct and check them regularly. You should read all documents sent to you and be aware of the details required. Please respond promptly to any requests for further information.

Our matching efforts can only be as good as the information you provide. **It is very important that you are honest and sincere and provide us with as much detail about yourself, your interests, your family and your lifestyle as possible.**

* **Head shot photograph**: You must include a head shot photo on the front page of the application form.

## Family Information Sheet: This must be completed by your parents/legal guardians. This serves as the first introduction to the German family of your family, so provide as much detail as possible.

* **Statement of Motivation and Self Characterisation:** This should be completed by you, the applicant. Provide as much detail as possible – you do not have to only answer the questions that are there to prompt you. You can add further information or anything you wish your partner/host family to know.
* **Photograph page:** Colour pictures are preferred and should be arranged with captions on a page (or pages). This is your opportunity to visually show your future German partner/host family what your life is like. Creating a collage photo page can be fun and useful for this.
* **Medical Information Page:** A medical certificate, including your vaccination history, from your usual GP or specialist is required in addition to your self-declaration and **must confirm that you are fit and able to participate in this Exchange Programme, as well as detailing any ongoing and past** **medical conditions, your vaccination status, and any medications that you take on a regular basis.** Please include a scan of this with your application.
* **School Recommendation Page:** This must be completed by your (German) teacher **and** Principal/Director. These must remain confidential. **The school is asked to scan and email this to the Exchange Organiser.**

**Application checklist:**

* Ensure ALL sections of the Application form are completed in full.
* **Email your completed Application to the Exchange Organiser at**

[**nzfrgexchange@gmail.com**](mailto:nzfrgexchange@gmail.com) **no later than Friday, 15 March 2024.**

* Ensure the Medical Certificate and the School Recommendation form are scanned and

emailed to the Exchange Organiser.

* Make an online payment of the $400.00 Application Administration Fee to:

KL McGuiness-King – German Exchange

06-0317-0368743-01

Use your name as the reference/code details so the Application and payment can be

reconciled. Late applications incur an additional charge of $50.00 (total payable $450.00).

* Ensure all documents are sent by the application deadline.

**Dr Kristina McGuiness-King**

**Exchange Organiser**

**New Zealand/German Student Exchange**

**PO Box 99**

**OPONONI 0445**

**Northland**

**Mobile: +64 274 527173**

**Email:** [**nzfrgexchange@gmail.com**](mailto:nzfrgexchange@gmail.com)

**Facebook: https://www.facebook.com/nzfrgexchange/**

**NEW ZEALAND/GERMAN STUDENT**

***Insert head shot photograph here.***

***(Insert photo here)***

**EXCHANGE PROGRAMME 2024**

**Student Application Form**

# PERSONAL INFORMATION:

**Surname:** **Given Name(s):**

**Preferred Name(s):**

**Address (Street, Suburb, Town/City & Postcode):**

**Home Phone Number:**

**Mobile (Student):**

**(Parent(s)):**

**Email Address (Student):**

**(Family/Parent(s)):**

**Date of Birth (dd/mm/yy):**

**Gender:**

**Gender Pronoun:**

**Nationality:**

**Religious Affiliation:** ***(if applicable)***

**Passport Number:**

**Name of School:**

**Year:**

**German Teacher’s Name:**

**School Address (Postal):**

**School Phone:**

**School Email:**

**How many years have you been learning German?**

**What other languages do you speak?**

**Father’s Name:** **Occupation:**

**Father’s Date of Birth (dd/mm/yy):**

**Mother’s Name:** **Occupation:**

**Mother’s Date of Birth (dd/mm/yy):**

**Do you have any:** **Sisters** ◻ **Age(s):**

***(Please tick)*** **Brothers** ◻ **Age(s):**

**How many siblings live at home?**

**Which language(s) are usually spoken at home?**

**Do you have any pets? *(Give details)***

**Are you a smoker?** Yes / No **Do any of your family smoke?** Yes / No

**Inside the house?** Yes / No ***or*** **Outside only?** Yes / No

**Do you have any physical restrictions, impairments or allergies that will limit placement options**

**or participation in everyday family and/or school activities?** Yes / No

**If yes, please explain**: (***Attach detailed information if you are receiving medical treatment.)***

**Are you vegan or vegetarian?**

**If you are a vegetarian, do you eat:**  Fish ◻ Chicken ◻ Dairy Products ◻

**Which other countries have you visited (when, where, for how long, exchange experience, etc.)?**

**LEISURE ACTIVITIES:**

**Sports played and how often *(e.g. 2 x per week)*:**

**Sports interested in:**

**Sports not interested in:**

**Musical and artistic interests:**

**Instruments played:**

**Band:** **Choir:**

**Classical:** **Other:**

**Dance/Theatre and how often:**

**Other hobbies / interests / leisure activities:**

**My partner will have the opportunity:**

**To participate in the following sporting activities:**

**To participate in the following musical activities:**

**To visit:** sport events ◻ theatre ◻ concerts ◻ museums ◻

**To meet with other young people outside of school activities:** Yes / No

**Further comments about possible sport/leisure activities or hobbies:**

**How do you like to spend your free afternoons/evenings/weekends?**

**How much time do you spend on the internet/social media, etc. per week?**

**Rank the following in order of preference from 1-5 *(1 being the best)*:**

◻ At home with the family

◻ At home in the company of other young people

◻ On excursions with the family

◻ On excursions with other young people

◻ Excursions on your own initiative

**Are you a member of any youth organisation/group? In any position(s) of responsibility at your School?**

**I am best described as: ◻ Calm/Reserved**

***(Tick those that apply)* ◻ Energetic/Outgoing**

**◻ Socially Active**

**◻ Academic**

**◻ Athletic**

**◻ Shy**

**What are your current career aspirations once finished at school?**

**ACCOMMODATION:**

**House** ◻ **Apartment** ◻ **Urban**  ◻ **Rural** ◻

**Will your partner have his / her own room?** Yes ◻ No ◻

***Please include a photo of the room your partner will have during the Exchange as part of the photo page.***

**PARTNER PREFERRED:**

◻ **Boy** ◻ **Girl** ◻ **Either**

*(Note: If you attend a single sex school, you cannot host a partner of the opposite sex.)*

**Would you accept a partner of another religious affiliation?** Yes / No

**Would you be willing to host a partner who follows a special diet (e.g. who is vegetarian, or**

**who has food allergies)?** Yes / No

**Do you have any particular requests?**

**YOUR TRAVEL ARRANGEMENTS:**

To enable the travel agent to organise the necessary connecting flight bookings, please indicate the New Zealand airport you want to depart from and return to when you travel to Germany (i.e. Auckland, Wellington or Christchurch). ***Connecting flights are available from other New Zealand airports; however, this will incur an additional charge to the package price.***

**For my travel, I wish to depart from/return to:**

Auckland / Wellington / Christchurch / Other:

**TRAVEL ARRANGEMENTS FOR YOUR PARTNER:**

To enable the German organisers to make connecting flight bookings for their students, **please indicate where you want to collect and return your German partner from. You may choose any airport in New Zealand that is convenient for you**. However, note that with smaller airports, this may well mean an extended wait in Auckland for your partner before being able to catch a connecting flight. We would appreciate you keeping this in mind when nominating your airports.

1. **arrival airport:**
2. **return airport**

**FAMILY INFORMATION:**

***(To be completed by the applicant’s parents/legal guardians.)***

**1. Description of each member of the family:**

**2. Description of your family lifestyle:**

**3. Description of your home and facilities:**

**4. Description of your neighbourhood (nearest town/city, means of transport, etc.):**

**5. Description of any intercultural/exchange experiences other members of the family (other than the applicant) may have had:**

**6. Description of what activities/trips you might undertake with the hosted student:**

**7. Description of any requests you might have regarding the hosted student:**

**Parents or Legal Guardians’ Signatures:**

**Date:**

**STATEMENT OF MOTIVATION & SELF CHARACTERISATION:**

***(To be completed by the applicant.)***

Please write about what you expect to contribute to your host family and to the country you will be visiting. Similarly, write what you expect to gain from participating in this Exchange programme.

Please describe yourself, your character strengths and weaknesses and your daily life.

You should also include answers to the following questions:

* How would you describe your relationship with your family and friends, e.g., how much time do you spend with your brothers/sisters and /or friends, what is your role in the family, in what situations do you seek advice from your parents?
* What are your different roles in your community, e.g., school, sports, and community activities? What is important to you?
* What parts of your daily life do you like and what parts do you find frustrating or difficult?
* Have you had any experience in a foreign country (e.g., class trip or holiday) or with people from another culture? What did you especially like and how did you manage problems that may have occurred (e.g., language problems, cultural misunderstandings)?
* What would you consider to be the most important experience you have made in life so far?
* What do you hope to do in the future? (Study, career path, etc.)

**PHOTOGRAPHS OF FAMILY, FRIENDS & HOUSE:**

Please provide some clear colour photos of yourself, your family and friends, your home – including of the room your Exchange partner will have during their stay – and neighbourhood, your hobbies, pets, school, etc. Include a brief caption describing each photo.

**MEDICAL INFORMATION:**

**A medical certificate from your GP is required in addition to this self-declaration.**

*(Scan and email this to* [*nzfrgexchange@gmail.co*](mailto:nzfrgexchange@gmail.co)*m with your application.)*

**Student's Name:**

To ensure the safety of the participants, it is important to have detailed information about each participant’s state of health. This includes all intolerances, allergies, certain restrictions, regularly used medication, vaccination status, etc., including information about any relevant medical history, pre-existing conditions, previous occurrences of mental health issues, operations, long-term treatments and therapies.

Please answer all questions honestly and completely and give comments if necessary. Any updates or changes during the year will require a further medical examination and an updated medical certificate. This must be provided to the Exchange Organiser as soon as possible, and at the very latest, three weeks prior to departure.

**Please answer all questions. If answer is yes, please give details:**

**NO** **YES**

◻ ◻ Presently taking medication? *Please specify type, dosage and time.*

What for? (E.g. symptoms)

◻ ◻ On a special diet?

◻ ◻ Has had recent surgery?

◻ ◻ Has been vaccinated against all common communicable diseases, e.g.

Measles, flu, Covid-19?

◻ ◻ Has had a physical examination within the last year?

◻ ◻ Has had a tetanus shot within the last year?

◻ ◻ Allergies: Hay fever ◻ Insect stings ◻

Penicillin ◻ Other drugs ◻

Other:

◻ ◻ Suffers, or has suffered, from any form of eating disorder

(e.g., Bulimia, Anorexia)? ***Provide a letter from your doctor certifying that you can participate in this Exchange programme.***

◻ ◻ Suffers, or has suffered, from any form of emotional, mental wellbeing disorder (e.g., anxiety, depression)? ***Provide a letter from your doctor certifying that you can participate in this Exchange programme.***

**EMERGENCY CONTACT ADDRESSES:**

In the case of emergency, your parents or legal guardians will need to be informed as quickly as possible. Please complete the following, **giving your parents or legal guardians’ name and address, as well as those of two other contact people** (e.g., family friends, neighbours or relatives).

**1. Parent(s) Name(s):**  **Home Address:**  **Home Phone:**  **Work Phone:**  **Mobile:**  **Email:**

**2. Additional Contact 1 Name:**  **Relation to Student:**  **Home Address:**  **Home Phone:** **Work Phone:**

**Mobile:**

**Email:**

**3. Additional Contact 2 Name:**  **Relation to Student:**  **Home Address:**  **Home Phone:** **Work Phone:**

**Mobile:**

**Email:**

**STUDENT’S CODE OF BEHAVIOUR:**

1. I understand that I will be an ambassador for my family, my school, and New Zealand while in Germany and that my country will be judged by my behaviour, appearance and attitudes. I will therefore be co-operative and supportive of the Group Leader(s) and other students on the Exchange with me, and sensitive to differences of culture and backgrounds that I will encounter overseas.

I will not disseminate information detrimental to the reputation of others, including through digital media such as mobiles, email, social media platforms/networks (e.g., Facebook/Instagram). I recognise that the dissemination of information that slanders, insults, hurts or damages other may result in legal action and the termination of this Exchange.

2. I understand that school attendance forms an integral part of this Exchange and is therefore compulsory.

3. I understand that I am not permitted to travel independently and without adults during the Exchange period while I am in Germany and that breach of this condition will result in immediate termination of this Exchange.

1. I will not drive a motor vehicle of any description during the Exchange.
2. I will not drink alcohol unless accompanied by an adult member of my host family, or take non-prescription drugs of any kind.
3. I agree to abide by instructions given by the Group Leader(s), the organisers of the New Zealand/German Student Exchange, and the German organising authorities, Bayerischer Jugendring Munich.
4. I will accept the direction and guidance of my host parents at all times.
5. I understand that the benefit I will gain from this experience will depend to no small extent on my own efforts. To enable my active participation in the Exchange, I agree to keep the use of IPhones, IPads, Skype, social media platforms/networks to a minimum throughout the period of the Exchange. I agree to restrict contact with my home country through social networks and media, such as Facebook, WhatsApp, Skype, and FaceTime. I will access these sites no more than two or three times per week. Only in unusual or exceptional circumstances, will I extend this limit (to a maximum of one hour per day).
6. I am aware that downloading materials from the internet, (including films, television shows and music) without appropriate payment to the copyright holder(s) can be illegal. I therefore promise to seek my host family’s permission before downloading any materials. Furthermore, if I choose to ignore this warning, I accept that I (and my parents) will be responsible for any financial costs, or other consequences, involved in such actions. The host family, which has provided the internet connection for my use, will not be held legally or financially responsible because of my actions.

10. I declare that all information supplied with this application is true and correct.

**Applicant’s signature:**

**Date:**

**PARENTAL AUTHORISATION:**

1. We/I have read carefully and accept the conditions of the Exchange as set out in the New Zealand/German Student Exchange Family Information Sheet and the notes that form part of this Application Form, and submit our/my daughter’s/son’s application on those terms.

2. We/I authorise the host parents to act in ‘loco parentis’ for the duration of our/my daughter's/son's visit.

3. We/I understand that in the case of serious misconduct or major breach of the Code of Behaviour which has been signed by our/my daughter/son, We/I will be informed and our/my daughter/son may be sent home at our/my expense.

4. We/I declare that our/my daughter/son is covered by insurance in the case of accident, illness or death, and that we/I will meet any extra costs that may be incurred.

5. We/I authorise the host parents to consent to any hospital treatment, including anaesthetic, which may be deemed necessary by the consulting physician and in the best interests of our/my daughter/son.

1. We/I understand that while participating students are accompanied and supported by group leaders, their travel is of a private nature for which students and their legal guardians accept full responsibility. A legal liability on the part of The New Zealand/German Student Exchange is therefore excluded.
2. We/I undertake to host a German student on their return visit to New Zealand as part of the Exchange.

8. We/I declare that all information supplied with this application is true and correct.

**Parents or Legal Guardians’ Signatures:**

**Date:**

**SCHOOL RECOMMENDATION:**

**This form should be completed by the applicant’s German teacher, in consultation with other staff, to provide fair assessment of the student’s suitability as an Exchange student.**

*Please complete and scan to* [***nzfrgexchange@gmail.com***](mailto:nzfrgexchange@gmail.com)*.*

**School Information:**

**Student’s Name:**

**Age:**

**Current Year in School:**

**School Name:**

**School Address:**

**School Phone:**

**Website:**

**Name of Principal/Director:**

**Liaison Teacher for Exchange Partner:**

**Liaison Teacher’s Email:**

**Student Assessment: Average Good Very good Outstanding**

1. Ability to mix well with people: ◻ ◻ ◻ ◻

2. Development and maturity as a student: ◻ ◻ ◻ ◻

3. Acceptance by other students in the school: ◻ ◻ ◻ ◻

4. Personality: ◻ ◻ ◻ ◻

5. Application to study in German: ◻ ◻ ◻ ◻

6. Application to study in general: ◻ ◻ ◻ ◻

7. Willingness to participate in extra-curricular activities: ◻ ◻ ◻ ◻

**Please comment of the student’s personality and motivation to live in a school overseas and host family on an Exchange programme.**

**Family Background:**

**Do you know the student’s family personally?** Yes / No

**If yes, please indicate whether you consider this family fit to host an Exchange student.** Yes / No

**Please specify how long you have known the family:**

**Please specify which members of the family (e.g., mother/father/siblings) you have met personally:**

**Additional Comments you may wish to make regarding this applicant and/or family?**

**Overall Recommendation:**

**This applicant is highly recommended / recommended / not recommended for participation in the New Zealand / German Student Exchange. *(Please highlight appropriate recommendation.)***

**Signed by Teacher in charge of German**

**Date (dd/mm/yy)**

**School Attendance by Exchange partner:**

**The Exchange partner is permitted to attend our School during his/her stay in New Zealand.**

**School Principal/Director [*School Stamp/Seal*]**

**Date (dd/mm/yy)**