



## Western Cape – Bavaria

### Two and a half months' (10 weeks) High School Student Exchange Program based on Reciprocity (non-profit)

In cooperation with the Bavarian Youth Council, the School Exchange Bavaria-Western Cape will once again offer a non-profit student exchange program based on reciprocity with Bavaria during the school year 2019 and 2020. This will mark the sixth intercontinental exchange since its start in 2014.

The basis of this program is that it is a **reciprocal exchange**: This means that Bavarian students live with a carefully chosen South African partner family and attend the South African high schools for 10 weeks: 26 July – 5 October 2019.

In the following academic year 2020, the South Africa students will in turn visit and live with their German exchange partner's family and attend the high schools of their partners for 10 weeks in Bavaria: May-July 2020.

### Why participate in this program?

- Expand your social skills and personal growth
- Expand your competence to act in an intercultural context
- Improve your German through total immersion
- Learn about the culture in Germany
- Experience a different school system
- Experience independence in making own decisions

### Target group

This exchange program is best suited for students who are outgoing, tolerant and open to new cultural encounters and experiences. The program is not suitable for students who are introverted and whose main leisure time activities are watching TV, playing video games or surfing the internet. In this context, we would like to refer applicants to point 8 of the Code of Behavior and to point 3 of the Parental Authorization.

### Conditions of participation

- An official approval of relevant authorities and school principals to participate in the scheme, i.e. the confirmation that (a) German exchange student(s) will be accepted at your school as (a) guest student(s)
- The consent of your parents or guardians
- Age: Approximately 15 or 16
- Profound interest in the German language and culture
- Capability of your family to provide the incoming exchange student with suitable accommodation at home
- Regular school attendance in both countries (mandatory)

The participation in this program requires being open and ready to handle the local realities, which can be very different from those in your home country. Tolerance is an expected character trait. It requires the necessary sensitivity, the mutual comprehension and the acceptance of major intercultural differences. In principle, it is not possible to change the host family. It is neither permitted to end the program or change the host family or school high-handedly by the participant or by the host family. Should these measures be unavoidable, they are only possible after consultation of and in collaboration with the responsible coordina-



tor Ms. Lize Kapp and the Bavarian Youth Council. The main criteria used during the matching process are comparable points like age, sex, hobbies, interests in music or sport or other activities, special requests, certain restrictions (e.g. allergies). For this reason it cannot be guaranteed that every applicant can be matched.

### **Costs**

Approx. costs ~ R. 18,000 (+/- 10%): including flight (due to availability), chaperone (out and inbound – if more than 10 participants), administration fee (application procedures, flight arrangements, communication and supervision, meetings, transport costs, advertisement, etc.) and emergency fund. **Please be aware, pocket-money, medical aid coverage (Schengen area) and liability insurance are subject to individual arrangements!**

**You are encouraged to contribute a charitable donation for socially weaker families, in order to enable their children to participate in this program. Your sponsorship of just R 500,00 may assist an underprivileged youth to experience a once in a lifetime exchange. (Please see N° 7 “parental authorization” – page 2/2)**

**Bursaries (of max. 50%) are available to students from families with the following criteria - low income households, unemployment of parents, single parents, to parents with more than one child at school age. You will need to verify your financial status by submitting bank statements of the past three months upon submission of your application. (Please see N° 4 “parental authorization” – page 2/2)**

**Please contact your local coordinator in the Western Cape: Ms Lize Kapp – [lizkap@bridgehouse.org.za](mailto:lizkap@bridgehouse.org.za)**

### **High school in Germany**

High school (called “Gymnasium”) in Germany provides an academically oriented general education that is the prerequisite for university studies. At the same time it establishes a basis for vocational training outside the University. German students enter the Gymnasium at the age of 11 after 4 years of primary school education and normally leave with the General University Entrance Certificate (called “Abitur”) at the approximate age of 18.

### **Bavaria**

Bavaria is situated in the south of Germany, and it is the largest of the 16 German federal states of Germany. Its capital is Munich.

### **Importance of the German language**

German is the native language spoken by the largest number of people in Europe (more than 90 million). It is the language or one of the official languages of Germany, Austria, Switzerland, Italy (Tyrol), Liechtenstein, Luxembourg, Belgium and the European Union.

### **The following documents are necessary for your stay in Germany:**

- A valid passport with an expiration date greater than 6 months from the date of leaving the Federal Republic of Germany and with at least two empty pages for the visa
- You will need a Schengen visa. Please apply for one at least 3 months prior to your departure date. Contact **Ms Kirsten Buchhorn** via email ([ku-1@kaps.auswaertiges-amt.de](mailto:ku-1@kaps.auswaertiges-amt.de)) with regards to scheduling an appointment at the German Consulate General in Cape Town. Please ensure that you bring **all** required documents to the appointment. You will receive the list of required documents, once you have been chosen for the exchange.



To give you some insight into the documentation package that will be required please see below:

1. "Formal letter of obligation" which your Bavarian host family will need to organize at a local authority
  2. An acceptance letter from the Bavarian school
  3. An acceptance letter from the Bavarian host family
  4. A document from BJR confirming the exchange
  5. A certified "Affidavit of Consent for Children Travelling Abroad"
  6. A certified copy of your international birth certificate or the original unabridged birth certificate
  7. A certified copy of the identity cards or passports of both parents
  8. A document written by your parents, stating that they will be at the airport upon arrival of your return journey to South Africa, to pick you up, including all necessary contact details (home address in South Africa, phone numbers, etc.)
- In addition, please save all of the above documents on a USB stick. The exchange student is supposed to carry it with him/her on his/her trip to Germany.

## Application procedure

The application documents must to be completed, signed and submitted electronically to your local coordinator **Ms Lize Kapp**. Additionally, a printed version of all documents must be submitted to the responsible German teacher (tutor) at your school **by no later than 30 March 2019**. In order for your application to be considered, your coordinator Ms Kapp requires a written recommendation letter (confidential) from your school (teacher) and a declaration of consent to host a German student at your school with the name of responsible teacher.

Now you are ready to start the process:

**Step 1)** Please print out the below application documents in color print, complete these in clear legible handwriting and sign them. Sort the documents in the exact order as listed below (see list), then scan in a color version. Before sending the documents – please ensure that the scan is clearly legible.

**Step 2)** Save the application including your ID picture as one single PDF file. **Do not include the confidential school recommendation.** The file name must include the family name and the first name of the applicant (e.g. Mustermann Max). **The file must not exceed 7 MB!**

**Step 3)** Send the PDF file as an e-mail attachment to Ms. Lize Kapp's e-mail account by no later than **31 March 2019**: [lizkap@bridgehouse.org.za](mailto:lizkap@bridgehouse.org.za)



**Sort documents as follows:**

<b>1 x</b>	Application form filled out in German <u>or</u> English with an ID picture.
<b>1 x</b>	Print out pictures of your family, your house or apartment from the outside and inside and of the room that your guest student will be staying in.
<b>1 x</b>	Health information form (see attached form, to be filled out in English)
<b>1 x</b>	Letter to the exchange partner in German (preferably handwritten) containing the following: <ul style="list-style-type: none"><li>• Introducing your family (age and hobbies)</li><li>• Description of your home town and surroundings, your school and way to school, your duties at home</li><li>• Expectations (your own and towards your partner) concerning the program</li></ul>
<b>1 x</b>	Code of Behavior (see attached sheet)
<b>1 x</b>	Parental Authorization (see attached sheet)
<b>1 x</b>	Confirmation of the school (see attached form, to be completed by the school)
<b>1 x</b>	Parental consent of data protection (see attached form)
<b>1 x</b>	Preliminary Application Form (to be filled out in English)

**Step 4) Hand in the printed version of the above documents together with the school recommendation form to your tutor / German teacher at school, who will complete the confidential recommendation form (in German or English).**

**Step 5) The tutor/teacher must then send the full application + confidential school recommendation via postal service to the local coordinator, Lize Kapp, by no later than **31 March 2019**:**

Bridge House School  
ATT: Lize Kapp  
P.O. Box 444  
Franschhoek, 7690

Important:

- We require the **original** signatures on the forms where requested.
- Before you submit your application to the tutor at your school, please check the documents whether they are **complete** and whether they are **sorted in the right order**.



## INDIVIDUAL STUDENT EXCHANGE WESTERN CAPE - BAVARIA

Bridge House School  
ATT: Lize Kapp  
P.O. Box 444  
Franschhoek, 7690  
[lizekap@bridgehouse.org.za](mailto:lizekap@bridgehouse.org.za)

ID Photo  
not older than 6 months

### 1. Bewerbung / Application

#### Deutsch-Südafrikanischer Schüleraustausch (Bayern – Provinz Westkap) / German-South African Student Exchange (Bavaria – Province of Western Cape) (10 weeks) *(Bitte in Druckbuchstaben ausfüllen / Please print all information clearly)*

Familiennamen / <i>Surname</i>		Vorname / <i>First name</i> (ein Name genügt)	
Straße / <i>Street</i>		Nr. / <i>No.</i>	PLZ / <i>Post Code</i> Ort / <i>Town</i>
Telefon mit Vorwahl / <i>Telephone (incl. area code)</i> Fax: Handy Schüler/-in / <i>Mobile phone student:</i>		E-mail Schüler/-in / <i>student:</i> Email Eltern / <i>parents:</i> Handy Eltern / <i>Parents mobile phone:</i>	
Geburtsdatum / <i>Date of birth</i>	Größe / <i>Height</i> cm	<input type="checkbox"/> Männlich / <i>Male</i> <input type="checkbox"/> Weiblich / <i>Female</i>	
Konfession / <i>Religion</i>		Staatsangehörigkeit / <i>Citizenship</i>	
Name der Schule / <i>Name of School</i>		Homepage der Schule / <i>School</i> Name Tutor/-in: Email Tutor/-in:	
Straße / <i>Street</i>	Nr. / <i>No.</i>	PLZ / <i>Post Code</i>	Ort / <i>Town</i> Telefon mit Vorwahl / <i>Telephone (incl. area code)</i>
Klasse / <i>Year Level at school</i>		Unterrichtsjahre in Deutsch / <i>Years of German instruction</i>	
Name des Vater / <i>Father's name</i>		Beruf / <i>Occupation:</i> z.Zt. tätig als / <i>present occupation:</i> Tel. geschäftlich / <i>business</i>	
Name der Mutter / <i>Mother's name</i>		Beruf / <i>Occupation:</i> z.Zt. tätig als / <i>present occupation:</i> Tel. geschäftlich / <i>business</i>	



### Familie / Family

Anwesende Familienmitglieder:  
*Family members at home:*

Vater / *Father*

Mutter / *Mother*

Schwestern / *Sisters:*

Alter / *Age:*

Brüder / *Brothers:*

Alter / *Age:*

andere / *Others:*

Gibt es religiöse Erwartungen / Verpflichtungen Deiner Familie an Dich?  
*Are there any religious expectations / commitments in your family of you?*

Ja / *Yes*  Nein / *No*

Wenn ja, welche? / *If so, please name them :*

Welche Fremdsprachen spricht man in der Familie? / *Foreign languages spoken in the family*

1. Muttersprachlich / *Mother tongue*

2. Erlernt / *2<sup>nd</sup> language*

### Unterbringung / Accommodation

Dorf / *Village*  Kleinstadt / *Rural Town*  Großstadt / *City*

Gemeinde im Großraum einer Großstadt / *Suburb*

Haus / *House*  Wohnung / *Apartment*

Erhält der Gast ein eigenes Zimmer? / *Will the guest have his / her own room?* Ja / *Yes*  Nein / *No*

Gibt es in Deinem Wohnort einen regelmäßigen öffentlichen Personennahverkehr (S-Bahn, Straßenbahn, Bus)?  
*Is there any regular public transport (train, tram, bus) where you live?*

Nein  Nur zur Schule und zurück  Nur tagsüber  Tag und Nacht   
*No*  *Only to school and back*  *Only during the day*  *Day and Night*

Haustiere / *Pets (welche / please specify):*

Andere Tiere / *Other animals:*

**Rauchen / Smoking**Rauchst du? / *Do you smoke?* Ja / Yes  Nein / No Raucht jemand in deiner Familie? / *Does anyone in your household smoke?* Ja / Yes  Nein / No  Innerhalb der Wohnräume / *Indoors*  Außerhalb der Wohnräume / *Outdoors*  Beides / *Both*Könntest du eine Familie akzeptieren, in der innerhalb der Wohnräume geraucht wird? Ja / Yes  Nein / No   
*Could you live in a household where somebody smokes indoors?*Akzeptiert deine Familie eine/n Gastschüler/-in, der / die im Haus raucht?  Ja / Yes  Nein / No  
*Would your family accept a student that smokes indoors?***Sport / Sports**Ausgeübte Sportarten / *Sports played*Wie oft? / *How often?*  
(z.B. 2 x wöchtl. / *e.g. twice a week*)Kein Interesse an Sport / *Not interested in sports:* **Musikalische und künstlerische Interessen / Musical and artistic interests**Musikinstrumente / *Instruments played:*Wie oft? / *How often?*Bist du Mitglied in einer Musikgruppe? / *Are you in a band?*  Ja / Yes  Nein / NoOrchester/*Orchestra*  Chor/*Choir*  Andere /*Other:* \_\_\_\_\_Welche Musikrichtungen magst Du? *What sort of music do you like?*Rock  Pop  Indie/Alternative  Soul  Electronic  R&B  Jazz Klassik/*Classical Music*  Punk  Country/Folk  Andere/*Other:* \_\_\_\_\_Sonstiges (z.B. Malen, Töpfern, Schreiben) / *Other Interests (e.g. Drawing, Pottery, Writing):*



**Andere Freizeitbeschäftigungen / Other leisure activities**

Tanzen / *Dancing*      Ja / Yes       Nein / No       Std./Woche / *Hours per week:*

Welche Tanzart? / *What kind of dance?*

**Lesen / Reading**

Liest Du gerne? / *Do you like reading?*      Ja / Yes       Nein / No

Wie oft/Woche / *How often per week:*

Welche Art von Büchern? / *What kind of books?*

Fernsehen / *TV*      Ja / Yes       Nein / No       Stunden/Woche / *Hours per week:*

Welche Filme bevorzugst Du? / *What kind of movies do you like?*

Abenteuer/ *Adventure*       Komödie/ *Comedy*       Krimi/ *Thriller*       Arthouse/ *Arthouse*       Andere/ *Other*

Bist du Mitglied in einer Jugendgruppe, einem Sportverein oder einer anderen Organisation? Wenn ja, welche/r? <i>Are you a member of a youth group, sports club or any other organization? If so, please give details.</i>	Ich bin aktiv tätig / <i>I am an active member</i>	Ich habe eine Funktion / <i>I have a leadership position</i>

Bist Du in der Schule in einer der nachstehenden Funktionen aktiv tätig?  
*Have you taken a position of responsibility within your school as listed below?*

Schülermitverwaltung, Jugendvertretung o.ä.       Schülerzeitung   
*SRC, Representative Student Group*      *School Magazine / Publication*

**Internetnutzung / Use of Internet**

E-mail      Nein / No       Ja / Yes       Std./Tag / *hours per day:*

Surfing Internet      Nein / No       Ja / Yes       Std./Tag / *hours per day:*

Social Media      Nein / No       Ja / Yes       Std./Tag / *hours per day:*

Video Games      Nein / No       Ja / Yes       Std./Tag / *hours per day:*

Stunden pro Woche insgesamt / *total hours per week:*





### Partner

Gewünschter Partner / Preferred Partner

Junge / Boy  Mädchen / Girl  Beides möglich / Either

Darf der Partner einer anderen Konfession angehören?/  
Would you accept a partner of another religion? Ja / Yes   
Nein / No

Bemerkung /  
comment: \_\_\_\_\_

Darf der Partner eine körperliche Beeinträchtigung  
haben? / Would you accept a partner with a physical  
handicap? Ja / Yes   
Nein / No

Bemerkung /  
comment: \_\_\_\_\_

Mein/e Partner/-in hat Gelegenheit zu folgenden Aktivitäten:  
The following activities would be available to my partner:

### Deine Charakterzüge / Your features

Kreuze in der Werteskala an, was Dich am besten beschreibt.  
Please mark the characteristics which describe you best.

	2	1	0	1	2	
Ich höre lieber zu / I prefer listening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ich rede gerne / I talk a lot
Ich bin gerne zu Hause / I like being at home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ich gehe gerne aus / I like going out
Ich bin gerne alleine I prefer being alone	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ich bin viel mit Freunden zusammen / I spend a lot of time with friends
Ich überlege genau, bevor ich handle I think things over before acting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ich bin spontan / I am spontaneous

### Sonstiges / Further information

Frühere Auslandsaufenthalte (wann, wo, wie lange, Austausch?)  
Name any countries you have visited up to now (when, where, how long, exchange?)



**Aktueller Berufswunsch / *career aspirations at the moment***

Was würdest Du gerne in Zukunft beruflich machen?  
*What would you like to do in the future?*

Hast du besondere Wünsche? / Do you have any particular requests?

**Erklärung:**

**Ich versichere die Vollständigkeit und Richtigkeit meiner Angaben. Mir ist bekannt, dass falsche Angaben eine erfolgreiche Vermittlung verhindern können. Ich werde Änderungen der in dieser Bewerbung gemachten Angaben unverzüglich melden. Die Teilnahmebedingungen des Bayerischen Jugendrings habe ich zur Kenntnis genommen und wurden von mir akzeptiert.**

***I declare that all the information given in the application form is complete and correct. I know that incorrect information can prevent a successful match. If any changes occur in the information given above, I will inform the South African coordinator immediately. I have taken note of the conditions of participation and payment, and I accept them.***

\_\_\_\_\_  
Unterschrift beider Eltern oder der Erziehungsberechtigten /  
*Signature of parents or legal guardians*

\_\_\_\_\_  
Unterschrift der Bewerberin / des Bewerbers /  
*Signature of applicant*

\_\_\_\_\_  
Ort / *Place*

\_\_\_\_\_  
Datum / *Date*



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## 2. Gesundheitsformular / Health information

**Please write in German and English and print clearly**

Name, Vorname / Name, First name: .....

Adresse / Address:

.....

Größe / Height: ..... Gewicht / Weight: .....

Erreichbarkeit (Eltern) / Contact (Parents):

Tel. Privat / Home: .....

Geschäftlich / Business: .....

Fax: .....

Handy / Mobile: .....

E-mail: .....

Für einen sicheren Ablauf der Teilnahme am Austauschprogramm ist es von großer Wichtigkeit, genauere Informationen über den aktuellen Gesundheitszustand zu haben. Dies beinhaltet auch Unverträglichkeiten, Allergien, bestimmte Einschränkungen, regelmäßig benutzte Medikamente etc. Dazu gehören auch Angaben zur Vorgeschichte wie Vorerkrankungen, Operationen, längere Behandlungen, Therapien.

*To ensure the safety of the participants and the smooth running of the exchange program it is important to have detailed information about each participant's state of health. This includes any special intolerances, allergies, certain restrictions, regularly used medication etc., including information about any relevant medical history, pre-existing conditions, operations, long-term treatments and therapies.*

Befürchtungen, dass die ehrliche Beantwortung zu Benachteiligungen im Bewerbungsverfahren führt, sind unbegründet. Sie erhöht im Gegenteil die Chancen auf eine optimierte Vermittlung.

*Please do not be afraid to be discriminated in the matching process in any way when you give totally honest answers. On the contrary, the true facts may well increase your chances of a more suitable match.*

Wir bitten, alle Fragen ehrlich und vollständig zu beantworten und ggf. zu kommentieren (wenn nötig, auf einem Beiblatt).

*Please answer all questions honestly and completely and give comments if necessary (if you need more space, please attach a separate sheet).*

Spätere Ergänzungen teilen Sie uns bitte **schriftlich** mit.  
*Please let us have updates in **written form**.*



		Erläuterungen / Explanations:
Vegetarier/-in / <i>Vegetarian</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Einschränkungen bei Ernährung / <i>Special diets</i> :	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Essstörungen (Vergangenheit) / <i>Eating disorders (past)</i> :	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Essstörungen aktuell / <i>Eating disorders (present)</i> :	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Angststörung / Depressionen (Vergangenheit) / <i>Anxiety disorder or Depressions (past)</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Angststörung / Depressionen (aktuell) / <i>Anxiety disorder or Depressions (present)</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Atemwegsprobleme / <i>Respiratory problems</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Allergien (auch Tierhaare und Insektenstiche) / <i>Allergies (e.g. pets, Penicillin, insect bite, etc)</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Bei Tierhaarallergie: Ist eine Vermittlung in eine Familie mit Haustieren trotzdem möglich? / <i>If allergic to animal hair, would you still accept a host family with pets?</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Diabetes	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Epilepsie / <i>Epilepsy</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Herzprobleme / <i>Heart condition</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Flugangst / <i>Fear of flying</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Phobien / <i>Other Phobias</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Bluthochdruck / <i>High blood pressure</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Niedriger Blutdruck / <i>Low blood pressure</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Operationen / <i>Operations</i>	Welche/wann <i>If yes, which/when:</i>	



		Erläuterungen / Explanations:
Sonstige chronische, physische oder psychische Einschränkungen wie z.B. Autismus, Asperger-Syndrom, etc./ <i>Physical or psychic limitations, e.g. autism, Asperger's syndrome, etc.</i>	Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>	
Benötigte Medikamente / <i>Required medication:</i>  <u>Impfungen / Immunizations:</u> 1. Masern / <i>Measles</i> 2. Mumps 3. Röteln / <i>Rubella</i> 4. Windpocken / <i>Chickenpox</i> 5. Tetanus 6. Diphtherie / <i>Diphtheria</i> 7. Polio 8. Keuchhusten / <i>Pertussis</i> 9. Meningitis C 10. Hepatitis B	Welche/Which:  Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/> Ja/Yes <input type="checkbox"/> Nein/No <input type="checkbox"/>  Andere / Others:	
Tetanus (wann zuletzt): <i>Tetanus (when last):</i>		
Sonstige Info zu Impfungen (ggf. Unverträglichkeiten) <i>Other info on immunizations and possible intolerances</i>		
Unverträglichkeiten von Medikamenten <i>Intolerances to any medication</i>		
Sonstige wichtige Informationen zur Gesundheit / Other important information on health		



Wir versichern hiermit, dass wir wissentlich keine Informationen bezüglich uns bekannter Krankheiten, Einschränkungen, Ernährungsgewohnheiten bzw. anhängiger oder vorausgegangener Krankheiten und Therapien verschwiegen haben. Wir übernehmen die volle Verantwortung für Probleme, die durch Nichtbeachtung entstehen können und sind uns bewusst, dass diese zur Beendigung der Teilnahme am Programm führen können.

*We herewith confirm that we have included all relevant information available to us concerning illnesses, disabilities, special diets, ongoing treatments and therapies. We accept full responsibility for any problems that may arise from our failure to disclose any relevant information and we are fully aware that this could lead to the termination of my / our child's participation in the program.*

Ich / Wir genehmige/n die ärztliche Behandlung für mein / unser Kind, falls diese von der Gesundheitsbehörde, der Gastfamilie bzw. den für das Programm Verantwortlichen für notwendig erachtet wird.

*I / We authorize any medical attention for my / our child if this is deemed necessary by the medical authorities, the host family or the educators responsible for the program.*

Datum / Date: .....

Unterschrift Teilnehmer\_in / Signature participant: .....

Datum / Date: .....

Unterschrift der Eltern bzw. gesetzl. Vertreter\_in / .....  
Signature of parents or legal guardians:





### 3. Verhaltenskodex – Code of Behavior

1. Der vollzeitliche Besuch der Schule im Ausland ist ein integraler Bestandteil dieses Austauschprogramms und für mich verpflichtend.

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

2. Ich weiß, dass es nicht gestattet ist, unabhängig und ohne die Begleitung von Erwachsenen während der Austauschzeit zu reisen und dass ein Nichteinhalten dieser Bedingung im Normalfall zu einer vorzeitigen Beendigung der Teilnahme am Austausch führt.

*I understand that I am not permitted to travel independently and without adults during the exchange period and that a breach of this condition will normally result in immediate termination of my Exchange.*

3. Ich werde während des Austausches kein motorbetriebenes Fahrzeug führen.

*I will not drive a motor vehicle of any description during the Exchange.*

4. Es ist mir klar, dass aufgrund der Jugendschutzgesetze im Ausland es nicht gestattet ist, Alkohol jedweder Art zu kaufen und / oder zu konsumieren. Das gleiche gilt für Tabakprodukte und Drogen jeglicher Art, außer vom Arzt verschriebene Medikamente.

*I understand that legislation abroad for the protection of children and young people makes it illegal to purchase or consume alcohol of any kind and it is therefore forbidden to do so. The same applies to tobacco products and drugs with the exception of those prescribed by a medical practitioner.*

5. Ich werde mich an die Verhaltensregeln meiner Gasteltern halten.

*I will accept the direction and guidance of my host parents at all times.*

6. Ich sichere zu, dass ich mich an die Maßgaben halte, die von den verantwortlichen Koordinatoren im Ausland kommen, von den Gruppenleiter/-innen des BJR sowie von den verantwortlichen Tutorinnen / Tutoren an meiner Austauschschule. Es ist mir klar, dass der Erfolg dieses Austauschprogramms zu einem großen Teil von mir selbst abhängig ist.

*I agree to abide by the instructions given by the coordinators responsible abroad, by BJR group leaders as well as by the tutor at my hosting school.  
I understand that the benefits I will gain from this experience will depend very much on my own efforts.*



7. Ich bin mir bewusst, dass ich im Schüleraustausch als ein Vertreter / eine Vertreterin meines Landes, meiner Schule und auch meiner Familie angesehen werde, während ich im Austausch bin und mein Verhalten, mein Erscheinen und auch meine Einstellung entsprechend angesehen werden. Ich sichere hiermit zu, dass ich mich bemühen werde kooperativ zu sein und die Verantwortlichen im Schüleraustausch, ebenso wie die Mitauswechselschüler/-innen unterstützen werde.

*I acknowledge that I will be acting as an ambassador for my family, my school and my country while abroad, and that my country will be judged by my behaviour, appearance and attitude. I will therefore endeavour to be co-operative and supportive of the Group Leader(s) and other students participating in the Exchange with me.*

8. Ich versichere, dass ich den Kontakt zum Heimatland während des Auslandsaufenthaltes über soziale Netzwerke wie Facebook und kollektive Kommunikationskanäle wie WhatsApp, Skype oder FaceTime etc. in angemessenen Grenzen halten werde. Das bedeutet im Normalfall, dass ich diesen freiwillig auf höchstens 2-3 mal pro Woche, in Ausnahmefällen auf maximal 1 Stunde pro Tag beschränken werde.

Ich bin mir bewusst, dass das Herunterladen von Dateien aus dem Internet (Filme, Musik etc.) ohne Wahrung der Urheberrechte und entsprechender finanzieller Begleichung illegal ist. Damit verpflichte ich mich, während des Auslandsaufenthaltes jegliche Art der Beschaffung von kostenpflichtigen Dateien aus dem Internet vorher mit der Gastfamilie abzuklären und deren Einverständnis einzuholen. Mir ist klar, dass dessen ungeachtet sämtliche finanziellen und anderweitigen Risiken, die dabei entstehen können von mir bzw. meinen Eltern übernommen werden müssen und in keinem Fall der gastgebenden Familie angelastet werden können, über deren Netzverbindung der Zugang ins Internet ermöglicht wurde.

*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).*

*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 as a result of my actions.*



9. Ich sichere hiermit zu, dass ich mich respektvoll gegenüber allen am Austausch beteiligten Parteien verhalten werde und vermeiden werde, das Ansehen anderer zu beschädigen. Dabei geht es vor allem um meinen Partner bzw. meine Partnerin, meine Gastfamilie, die Lehrkräfte und Mitschüler/-innen an der Schule im Ausland sowie die Teilnehmer/-innen der bayerischen Austauschgruppe. Das betrifft insbesondere die Verbreitung von Informationen zum Nachteil der Betroffenen in jedweder Form einschließlich digitaler Verbreitungsformen wie Handy, E-Mail oder über soziale Netzwerke wie z.B. Facebook etc. Mir ist bewusst, dass beleidigende, verleumderische oder verletzende Informationsverbreitung sowohl zu rechtlichen Konsequenzen als auch zur Beendigung meines Gastaufenthalts führen können.

*I undertake to act in a respectful manner in my dealings with all parties involved in the exchange program, and in a way that will not damage any person's reputation, including that of my partner, my host family, the teachers and students at my school abroad, as well as other participants in the Bavarian exchange group. I will not disseminate any information detrimental to the reputation of others, including through the use of digital media such as mobile phones, email, social networks such as Facebook, and the like. I recognise that the dissemination of information which slanders, insults, hurts or damages others may result in legal action and the termination of my stay abroad.*

Ich habe den Verhaltenskodex sorgfältig gelesen / *I read the Code of Behavior carefully.*

---

Datum / *Date*

---

Unterschrift der Bewerberin / des Bewerbers  
*Signature of Applicant*



#### 4. Einverständniserklärung der Eltern / *Parental Authorization*

1. Ich habe die Teilnahmebedingungen sowie die Merkblätter, die Bestandteil der Bewerbungsformulare sind, gelesen und erkenne die Rahmenbedingungen an, unter denen mein Sohn / meine Tochter an diesem Austausch teilnimmt.

*I have carefully read the conditions of participation as well as the memos which are part of the application forms, and submit my daughter's / son's application on those terms.*

2. Ich gestatte den Gasteltern im Ausland in loco parentis für die Dauer des Austausches für meinen Sohn / meine Tochter zuständig und verantwortlich zu sein.

*I authorize the host parents abroad to act in "loco parentis" for the duration of my daughter's / son's visit.*

3. Es ist mir klar, dass im Fall eines gravierenden Verstoßes meines Sohnes / meiner Tochter gegen den Verhaltenskodex, den mein Sohn / meine Tochter unterschrieben hat, ich informiert werde und mein Sohn / meine Tochter u. U. auf meine Kosten vorzeitig nach Hause geschickt wird.

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

4. Ich gestatte, dass die Gasteltern notwendige ärztliche Behandlung einschließlich eines Krankenhausaufenthaltes veranlassen, wenn von medizinischer Seite im Gastland die Notwendigkeit medizinisch attestiert wird und nach bestem Wissen und Gewissen zum Wohle meines Sohnes / meiner Tochter durchgeführt wird.

*I authorize the host parents to consent to any medical or hospital treatment, if deemed necessary by the consulting physician and provided that it is in the best interests of my daughter / son.*

5. Es ist mir klar, dass ungeachtet der Vermittlung des Bayerischen Jugendrings von Schule, Gastfamilie, Gruppenflug und Betreuung durch Gruppenleiter/-innen die Verantwortung für die Teilnahme meines Kindes bei den Eltern oder Sorgeberechtigten liegt und der Bayerische Jugendring nicht in die Haftung genommen werden kann.

*I understand that irrespective of BJR's arranging school, host family and group flights as well as chaperones on the flight out and in some cases on the return flight, the responsibility for the participation of my child rests with us as parents or guardian. A legal liability on the part of BJR is therefore excluded.*



6. Mir ist klar, dass Heimweh und Eingewöhnungsprobleme bei Austauschschüler\_innen in der Anfangsphase des Auslandsaufenthaltes häufig vorkommen. Ich sichere hiermit zu, den Integrationsprozess meiner Tochter / meines Sohnes in das Gastland zu unterstützen. Ich werde mich ebenfalls an den zeitlichen Rahmen halten, den mein Kind im Verhaltenskodex (s. Punkt 8.) unterzeichnet hat.

*I recognize and accept the fact that settling into a new family and country can result in a degree of homesickness, particularly in the early days and weeks of the Exchange. Therefore, to expedite the settling in process of my son or daughter, I promise to abide by the contact guidelines governing frequency and method of contact set out elsewhere in this Agreement, and agreed to by my son or daughter in the Code of Behavior (cf. Nr.8)*

Ich sichere hiermit zu, einen Schüler / eine Schülerin aus dem Gastland meines Sohnes / meiner Tochter für die gleiche Zeit in meinem Haushalt als Teil des Austauschprogramms und vollwertiges Familienmitglied aufzunehmen und vollumfänglich für ihn oder sie zu sorgen.

*I undertake to host a guest student, for the same length of time, on the return visit to Germany as part of the Exchange and to look after him or her carefully like a full family member.*

7. *You are encouraged to contribute a charitable donation for socially weaker families, in order to enable their children to participate in this program. Your sponsorship of just R 500,00 may assist an underprivileged youth to experience a once in a lifetime exchange.*

Charitable Contribution on a voluntary basis
We would like to contribute to the Bavarian Exchange Student Bursary Fund
R 500 <input type="checkbox"/> R 1,000 <input type="checkbox"/> R 2,000 <input type="checkbox"/> Individual amount _____ Not interested <input type="checkbox"/>
This amount is to be transferred together with the administration fee.

8. *Bursaries (of max. 50%) are available to students from families with the following criteria - low income households, unemployment of parents, single parents, to parents with more than two children at school age.*

Financial Support
We would like to apply for financial support due to
low income <input type="checkbox"/> unemployment <input type="checkbox"/> single parent <input type="checkbox"/> more than 2 children at school age <input type="checkbox"/>
You will need to verify your financial status by submitting bank statements of the past three months upon submission of your application.

\_\_\_\_\_  
Datum / Date

\_\_\_\_\_  
Unterschrift der Eltern bzw. gesetzl. Vertreter\_in  
Signature of Parents / Guardian



## 10-weeks' School Exchange Program (South Africa / Bavaria) based on reciprocity

-----  
Stamp of the school

### **CONFIRMATION**

The above named school is prepared to host a student from Bavaria from the end of July until the beginning of October 2019. The school will allow him or her to participate regularly and actively in class. The school will make sure that all classes attended by the Bavarian student will be taught in English if possible. The school also commits to set up an individual timetable according to the personal skills of the host student.

The tutor (responsible teacher) for the Bavarian student will be:

-----  
**Name of the tutor**

(Please write his or her **first and last name** in printed letters)

-----  
**E-mail address of the tutor**

-----  
**Name of the principal**

(Please write his or her **first and last name** in printed letters)

-----  
Place, date

-----  
Signature of the principal



## **Empfehlung der Schule /*School Recommendation***

### **CONFIDENTIAL / VERTRAULICH**

Dieses Dokument ist ausschließlich für die ausstellende Lehrkraft in Südafrika und den Bayerischen Jugendring bestimmt.

*This document is intended exclusively for the exchange coordinator in South Africa and the Bavarian Youth Council.*

### **Exchange program with Bavaria**

for: .....  
(*Name of student / Name der Schülerin / des Schülers*)

*Name of school / Name der Schule:* .....

This completion of the form as well as the evaluation of the student should be done by a teacher who teaches him or her several lessons a week. Ideally, it should be written by the class teacher. The teacher is required to note on how long he/she has been teaching the student.

The teachers evaluation should be as objective as possible, as this information will be the decision making factor on whether the student is suitable for an exchange program or not. It is used as a basis for a successful match.

The evaluation should particularly contain the following aspects:

- Personal characteristics which are important for a longer stay abroad
- Social skills
- Information about any particular commitment in school, e.g. participation in special projects
- Social commitment
- Self-motivation of the applicant to participate in the exchange
- Prerequisites to host a student (family and school)

It is not necessary to mention the applicant's hobbies, as they are given in the application form by the student himself / herself.



Bitte markieren Sie mit X / Please mark with X

**1. Reifegrad und Entwicklungsstand, um den Anforderungen eines mehrmonatigen  
Auslandsaufenthalt in einer Gastfamilie begegnen zu können**  
*Maturity to cope with the challenges of a 10-week international program*

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
------------------------------------	--------------------	------------------------------	------------------------------------

**2. Verhältnis zu Mitschüler/-innen / *Interpersonal skills with peers***

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
------------------------------------	--------------------	------------------------------	------------------------------------

**3. Verhältnis zu Erwachsenen und Lehrkräften / *Interpersonal skills with adults***

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
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**4. Reifegrad verglichen mit Gleichaltrigen / *Level of maturity compared to peers***

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
------------------------------------	--------------------	------------------------------	------------------------------------

**5. Einsatzbereitschaft im Unterricht / *Motivation in class***

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
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**6. Schulisches Engagement generell / *General involvement in school***

durchschnittlich <i>average</i>	gut <i>good</i>	sehr gut <i>very good</i>	hervorragend <i>outstanding</i>
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**7. Persönlichkeit / *Personality***

introvertiert <i>introverted</i>	zurückhaltend <i>reserved</i>	dazwischen <i>in between</i>	kontaktfreudig <i>outgoing</i>
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**8. Empfehlung der Schule für die Teilnahme des Schülers / der Schülerin am Aus-  
tauschprogramm**  
*School's recommendation for the student's participation in the program*

sehr geeignet <i>strongly recommended</i>	geeignet <i>recommended</i>	nicht geeignet <i>not recommended</i>
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**9. Empfehlung der Schule für die Teilnahme der Familie am Austauschprogramm**  
***School's recommendation for the family's participation in the program***

sehr geeignet <i>strongly recommended</i>		geeignet <i>recommended</i>		nicht geeignet <i>not recommended</i>	
--	--	--------------------------------	--	--	--

**10. Allgemeine Beurteilung des Schülers / der Schülerin aus Sicht der Lehrkraft (auf Englisch oder Deutsch)**

***General evaluation of the student from the teacher's point of view (in English or German)***

**11. Sonstige Anmerkungen / Further comments:**

.....  
Name der Lehrkraft in Druckbuchstaben / *Name of the teacher*

.....  
Kontaktdaten: E-mail, Telefonnummer / *Contact details of the teacher*

.....  
Unterschrift der Lehrkraft / *Signature of the teacher*



## 5. Datenerhebung – Datenschutz / *Data Collection – Data Protection*

Um den Austausch vorzubereiten und durchzuführen braucht der BJR persönliche Angaben von Teilnehmenden und der Familie. Darunter sind auch besonders sensible Daten zum Teilnehmer / zur Teilnehmerin wie Gesundheitsdaten und Religionszugehörigkeit, die vor allem für den guten und sicheren Ablauf im Gastland wichtig sind. Die Angaben und Daten werden vom BJR zum Zweck des Austausches an die Partnerorganisationen im Ausland übermittelt. Für die Erhebung und Nutzung der Angaben und der besonders sensiblen Daten braucht der BJR eine Einwilligung der Teilnehmer/-innen und der Erziehungsberechtigten. Die Einwilligung ist freiwillig und kann verweigert werden. Im Fall der Verweigerung kann der BJR jedoch keine Vermittlung vornehmen.

*BJR requires personal data of participants and their families to prepare and run the exchange program. Included in the data required is sensitive information pertaining to participants, such as health information and religious denomination etc. This is necessary in order to facilitate the good and positive operation of the program abroad. This data, of necessity, will be shared with partner organizations abroad for the benefit of the exchange. BJR requires the consent of participants as well as that of parents or guardian to raise and use that sensitive data. This consent is voluntary and can be refused but in case of refusal BJR will no longer be in a position to pursue the application process further.*

### **Einwilligung / Consent**

Ich / Wir willigen in die Erhebung und Nutzung der persönlichen Angaben und der besonders sensiblen Daten (Gesundheitsdaten, Konfession, etc.) und der Übermittlung an die Partnerorganisationen im Ausland zum Zweck des Programmes ein. Die Übermittlung der Daten kann auch online über eine sog. *cloud* erfolgen.

*I / We agree with the raising and usage of personal and particularly sensitive data (health information, religion, etc.) which will be shared with partner organizations for the benefit of the program. Personal data may also be transferred electronically (cloud system).*

Ich / Wir erteile(n) die Erlaubnis, dass Fotos von meiner Person / Fotos unseres Sohnes / unserer Tochter vom BJR, von der Austauschorganisation und der Schule im Ausland in Schulveröffentlichungen und Dokumentationen über den Schüleraustausch verwendet werden dürfen.

*I / We give permission for photographs of myself / of our son / daughter to be published by BJR, by the exchange partner organization and by the participating school abroad in school newsletters and exchange presentations.*

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Datum / *Date*

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Unterschrift der Bewerberin / des Bewerbers  
*Signature of Applicant*

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Unterschrift der Eltern bzw. gesetzl. Vertreter\_in  
*Signature of Parents / Guardian*



# Terms and conditions for participation in the Individual Student Exchange Western Cape and Bavaria

## 1. Organizers

The Bavarian Youth Council (*Bayerischer Jugendring*, or BJR) and its partner organization are non-profit, state-approved providers of youth work in their own country; with the present offering, they are fulfilling its role as outlined in the "Action Plan 2016" recently passed by the state government of Western Cape and Bavaria. The offerings comply with educational objectives. All parties involved do not generate profit from this offering, nor do they operate as a commercial tour operator. They solely act as a facilitator on behalf of each regional State Ministry for Education and Culture.

## 2. Program

The program description may stipulate a minimum number of participants; in the event that bookings do not reach the minimum number (min. 5 Pax), participants have no claim to provision of the program. Unless explicitly stated in the program description, Munich and Cape Town are the official locations for this program, i.e. costs for the outbound journey to Munich and the inbound journey from Munich shall be borne by the participant. Activities that are offered in the program description but not included in the overall price shall be paid for by the participants themselves and undertaken on their own responsibility without the supervision of the host parents; Additional trips abroad undertaken independently by the participants are not permitted as a matter of principle and may lead to the participant's expulsion; under certain circumstances special arrangements may be made in accordance with the organizations involved. These arrangements are subject to confirmation and explicitly have to be requested prior to departure by the participant in writing by stating the period of time and the destination address; in these exceptional cases any resulting costs shall be borne by the participant. Host parents shall be released from their supervisory responsibilities within this period of time.

## 3. Participants

Each participant must have reached the minimum age of 15 by the time she or he travels abroad. He or she must be resident in Bavaria or Western Cape and must, in principle, be enrolled in a Bavarian or South African school. Each participant is expected to be involved in the design of his or her program and actively participate in it. Where a program includes a preparatory event, participants are obliged to attend. Moreover, each participant must comply with the particular terms of this program, as stipulated in the program description. As a participant of a reciprocal program, the both families in Bavaria and South Africa undertake to provide room, board and supervision for the exchange partner for the duration of the stipulated period and to collect and return the guest student to the program location. In addition, should the initial exchange family have canceled the return visit, the German family is obliged to accept a suitable replacement from abroad on a proposal from BJR and its partner. The organizations involved do not reimburse families who have had higher expenses than their partner families or families whose exchanges have not been finished and whose return visits do not take place. Likewise, the organizations involved shall not be held liable for any damages or conflicts whatsoever that may occur among families. Disputes concerning the acceptance and the division of costs shall be resolved by the participants themselves.

## 4. Registration, contractual agreement

Registrations shall only be treated as binding if they are made in writing using the relevant registration or application form. Forms for minors must also be signed by the person acting as his or her legal representative. By submitting an application, participants agree to its terms and conditions for participation. This agreement shall be legally binding upon receipt of the written confirmation of the participation or placement. Participation in reciprocal placements (student exchange between two families, reciprocal school exchanges) shall only be offered



if a suitable partner can be found outside South Africa and that a partner in Germany also agrees to the placement proposal. Exchange applicants will receive a proposal as soon as it becomes available; a proposal may only be refused for critical reasons. As a general rule, the organizers will not source additional placement partners.

## **6. Payment terms**

Participation fees are due to the demand of the local coordinator (*end of October*). All payments shall be made upon receipt of the written payment request (invoice); no payments should be made prior to receiving this invoice. The relevant date used to determine receipt of payment is the date on which the payment has cleared on the account:

### **Capitec Bank**

**Account holder: Dr. Dirk Brand (support of local coordinator)**

**Branch code: 470010**

**Account No: 1431554438**

**Ref:** the correct name and surname of your child as written in his/her passport.

The Bavarian Individual Youth Exchange is a non-profit organization. However please note, that an administration fee of ~ R 6.000 is included in the costs for application procedures, flight arrangements, communication and transport, organization of orientation meetings and chaperoning /supervision.

## **7. Regulations pertaining to passports, visas, customs duties, foreign currency and health**

Participants are responsible for compliance with all regulations pertaining to passports, visas, customs duties, foreign currency and health. He or she shall provide the required identity documents, vaccination records and other certifications. The participant shall bear responsibility for any consequences and any costs incurred as a result of his or her failure to comply with these regulations. For further information please see the relevant program description.

## **8. Changes**

Any changes or modifications to the content of the individual program occurring after the agreement comes into effect are permitted, provided they are not significant and do not impact the overall arrangement of the program, in particular a change in service provider or modification of the itinerary. The same applies for services or program content in which the organizations act solely as facilitator. The organizations reserve the right to cancel events if it cannot guarantee provision of major program elements. Should this be the case, participants shall be reimbursed for any payments that have already been made. Participants will not have any further claims, in particular those regarding performance or compensation for damages due to non-performance. The organizations are entitled to withdraw from the agreement if performance of the program becomes difficult, dangerous or delayed due to circumstances unforeseen at the time the agreement is signed, e.g. through war, strikes, civil unrest, epidemics, government orders, natural disasters, destruction of accommodation facilities, or similar. This shall not affect both parties' right of cancellation due to force majeure. The organizations shall inform participants without delay of any cancellation due to the failure to reach the minimum number of participants or due to force majeure and in the event of any major changes to the program.

## **9. Insurance**

International Travel and Health Insurance are mandatory and subject to individual arrangements. All costs, including medical expenses, must be borne by the participant.



## **10. Supervision/Trip leaders**

The outbound journey (and inbound if more than 10 participants) will be chaperoned by a trip leader carefully selected by your local coordinator. The trip leaders are responsible for supervising all minors during this journey and take responsibility for supervision of transfers to the German host families at Munich airport.

## **11. Deficiencies / Obligation to cooperate**

Should deficiencies arise during a program, participants are obliged to report these complaints without delay to the local coordinator and its partner organization, the Bavarian Youth Council. Where disruptions or deficiencies occur, participants have a legal obligation to cooperate in avoiding or minimizing potential damage. The organizations undertake to rectify any situation caused by disruptions or deficiencies within a reasonable period of time. Participants are obliged to accept the equivalent substitute services offered.

## **12. Rescission**

Prior to the start of the trip, participants are permitted to rescind the agreement or withdraw their application by way of a written notice, which for minors must be signed by their legal representatives. The written notice takes effect on the date on which it is received by the organizations. Failure to pay any amount due does not in any way replace a written notice of rescission. In the event of rescission, the organizations are entitled to reasonable compensation less any expenses saved. Where the participant appoints a suitable replacement student in good time, the original participant shall be charged for any additional costs that arise due to the change. The organizations shall determine whether the appointed replacement student is suitable at their own discretion. The replacement student and the original participant shall have joint and several liabilities for the agreed trip costs.

Any other costs incurred by the organizations arising from the cancellation shall be borne by the participant.

Participants shall submit written notice of cancellations stating the reasons.

## **13. Liability**

In line with legal provisions, the organizations are liable for duty of care in its selection of service providers, in the accurate descriptions of the program, in the diligent preparation of the program and in the careful selection of its trip leaders.

Where the organizations operate solely as a facilitator for a particular program and this is explicitly stated in the program description, the organizations shall not be held liable for any mediated third-party services; equally the organizations shall not be held liable for excursions during the program that are not included in the participation fee or that are undertaken independently and on the participants' responsibility and accepts no liability for any acts of its partner organizations. Claims for damages in these instances shall be excluded or limited to the extent that, under statutory provisions which are applicable to services rendered by a third party, claims for damages against that third party are also excluded or limited.

## **14. Exclusion of claims / Statute of limitations**

Claims against the organizations must be made in writing within one month after the contractually agreed end date of the trip. Participants may only lodge claims after this period expires if they were prevented from observing the deadline through no fault of their own. Claims shall be time-barred after six months. The statute of limitation begins to run on the date the trip ends as stipulated in the agreement.

## **15. Special instructions**

Participants, or for minors their legal representatives, are obliged to report to the organizations in a timely manner about any serious illness or relevant circumstances that may affect the participant's participation in the program. In the event of illness or accident, the legal rep-



representatives shall give their consent to the provision of medical treatment to participants who are minors. In emergency cases, this consent also extends to surgical procedures, insofar as the attending physician deems these procedures absolutely necessary and where it is impossible to obtain prior consent from the legal representatives in due time.

#### **16. Final provisions**

Should any of the provisions of the agreement or the terms and conditions for participation be rendered invalid, this shall not affect the validity of the remaining terms and conditions or the validity of the agreement as a whole. The legal relationship between the organizations and the participant shall be governed by the laws of the Federal Republic of Germany and South Africa.

Version: January 2019

Bayerischer Jugending – Internationaler Schüleraustausch

Preliminary Application Form

Note: This form will be used for screening, selecting and matching candidates. Please return the completed form.

MUST BE TYPED OR CLEARLY PRINTED IN BLACK INK – in English

Family Name Usual First Name

Date of Birth Height (cm)

Home Town

Name of School & Town

Tutor

Father Occupation

Mother Occupation

Sisters/Ages Brothers/Ages

Family members who will be present during the hosting period

There are [ ] there are no [ ] smokers in my home. I can [ ] cannot [ ] accept a placement in a home with smokers (indoors). My family would [ ] would not [ ] accept a smoker.

Pets / Animals Allergies

Medical Conditions and / or Treatment

Will your partner have his/her own room? Yes [ ] No [ ]: share with: \_\_\_\_\_

Religious affiliation: \_\_\_\_\_

Must you attend services? Yes [ ] No [ ]

The following describes me: [ ] calm / reserved [ ] energetic / outgoing

[ ] athletic [ ] academic [ ] artistic / musical [ ] socially active

Food: [ ] I eat all [ ] vegetarian [ ] vegan

My exchange partner can be [ ] a boy only [ ] a girl only [ ] a boy OR a girl

My hobbies / pastimes / interests include the following in order of priority:

1. \_\_\_\_\_ 4. \_\_\_\_\_

2. \_\_\_\_\_ 5. \_\_\_\_\_

3. \_\_\_\_\_ 6. \_\_\_\_\_

I play the following musical instruments / am involved in the following musical activities:

\_\_\_\_\_

The following musical instruments / activities would be available for my partner:

\_\_\_\_\_

I participate in the following sports activities:

\_\_\_\_\_

My partner would be able to participate in the following sports activities:

\_\_\_\_\_

Please do not write in this box