**International Travel Studies**

Student Application Form – 2019/2020

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[Student Name][Grade Level as of Sept 2019]

Your application form for participation in the International Travel Studies Program will only be considered complete when accompanied by **ALL** of the items listed below:

[ ]  Completed application form signed by parent/guardian

* Contact information for the student and parent(s)/guardian(s)
* Travel Experience and Medical Information
* Student Statement of Interest (signed and typed)
* A signed copy of the Student Expectations Agreement

[ ]  TWO (2) Reference Surveys in sealed envelopes

* One Reference Survey must come from a Calgary Academy staff member who **CURRENTLY** teaches the student
* For new students, please have a **CURRENT** teacher at your school complete one Reference Survey
* Family members may **not** complete Reference Surveys for students

[ ]  Photocopy of student’s passport (**valid until October 3, 2020**) \* ‡

[ ]  Photocopy of student’s birth certificate ‡

[ ]  THREE (3) post-dated cheques for the amounts listed below:

* June 14, 2019 in the amount of $1,000
* SEPTEMBER 27, 2019 in the amount of $1,500
* NOVEMBER 1, 2019 in the amount of $1,500
	+ - January 24, 2020 A final post-dated cheque will be requested prior to this date. Final payment amounts vary from trip to trip.

\* Documentation from Service Canada or the Passport Office that shows a passport is being renewed is acceptable. Please provide a copy of the updated passport as soon as you receive your new passport.

‡ Please scan or photocopy the passport and birth certificate. Photos are acceptable provided all information is **CLEARLY** visible.

|  |  |
| --- | --- |
| **APPLICATION DUE DATE** | **TUESDAY, MAY 21ST BY NOON** |

Trips being offered in 2019/2020 are:

* Laos & Thailand
* Nepal
* Morocco
* Brazil

Please rank your trip choices in order of preference: \*

|  |  |
| --- | --- |
| **FIRST Choice** |  |
| **SECOND Choice** |  |
| **THIRD Choice** |  |

\* Please **DO NOT** list trips that you would turn down if offered, as it impacts the planning of trips and could result in a trip being cancelled after being offered to students.

**Please complete all sections of this page clearly using block letters.**

# Student Personal and Contact Information

|  |  |
| --- | --- |
| Student’s Given Name(s): | Student’s Last Name: |
| Birth Date (MM/DD/YYYY): | Gender: |
| Cell Phone Number: | Email Address: |
| Home Address: |

# Parent/Guardian Contact Information

|  |  |
| --- | --- |
| Name(s): | Phone Number(s): |
| Email Address(s): |

# **Travel Experience**

|  |
| --- |
|  **List the countries that you have travelled to in the last THREE (3) years. International travel experience is NOT required for participation in the ITS Program.** |
|  |

# Medical Information

|  |
| --- |
|  **Please list any allergies, and any medical treatments required.** |
|  |

|  |
| --- |
|  **Do you currently receive, or have you ever received any treatments for physical or psychological conditions/disorders?** **If Yes, please describe. \*** **\* *A confidential letter should be attached regarding past or present medical treatments for physical or psychological conditions/disorders.*** |
|  |

|  |
| --- |
|  **Do you have a special diet?** **If YES, please describe (i.e. Food allergies, food restrictions, vegan/vegetarian, etc.).** ***\* We recognize that there are issues around health, religion, tradition, and lifestyle that affect dietary needs. Please note that this kind of travel experience is not always able to accommodate “dietary dislikes”.*** |
|  |

# Photography & Social Media

|  |
| --- |
|  **Throughout the year, photos and videos will be taken of all students participating in various events as well as during each trip.** **Please check one box below with regards to the use of photos/videos of your child for promotional materials, social media posts, and the final trip video. Please keep in mind that this will affect group photos.** |
| [ ]  **I DO give my consent** [ ]  **I DO NOT give my consent** |

**I/We have read and verify that all contents in this form are correct and accurate to the best of my/our knowledge. I/We have reviewed this information in consultation with my/our child and provide my/our acknowledgement and consent below.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Parent/Guardian 1 Signature of Parent/Guardian 2

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name of Parent/Guardian 1 Printed Name of Parent/Guardian 2

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Date

# Student Expectations Agreement

Students applying to and participating in the International Travel Studies Program are expected to meet the following list of expectations:

1. Attendance: Attend and be on time for all classes, ITS Lunchtime Meetings, and ITS Volunteering Activities.
2. REACH: Demonstrate the REACH Principles (Respect, Enthusiasm, Altruism, Commitment, Honesty) and be an excellent ambassador for Calgary Academy throughout the school year.
3. Grades: Maintain a passing average in all course (academic core classes and options classes).
4. Health: Be in excellent physical, emotional, and mental health suitable to your trip.
5. Cooperation: Work to keep harmony in the group by treating yourself and others with respect and dignity; listening to and following all instructions; taking the time to get to know everyone on the trip; and following all school rules during ITS Activities.
6. Safety: The well-being and safety of every member of our team is essential. All measures will be taken to ensure this is the case. Supports and interventions will be provided for students who demonstrate unacceptable behaviours. If serious infractions occur, such as possession, use or distribution of banned substances, physical altercations, theft, etc. students may be removed from the trip at the expense of parents and may face further consequences.

**Calgary Academy reserves the right to withdraw a student’s application at any time, even after acceptance on a trip, should he/she/they fail to meet the expectations and requirements of the International Travel Studies Program.**

**I have read, understand, and agree to the expectations listed above. I acknowledge this list is not exhaustive.**

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 Signature of Student Signature of Parent/Guardian

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date Date

# Student Statement of Interest

Please read and respond to the following prompt, then attach your **SIGNED** and **TYPED** response to the application form. Your response will be used to better inform your application into the ITS Program.

**Why do you wish to join the ITS Program?**

In your response, consider addressing the following:

* What strengths you bring to the Program
* What excites you about the Program
* What you hope to learn from the Program
* The expectations of the Program
* The time and volunteering commitments
* How you intend to manage your academic and extra-curricular responsibilities/activities
* Your decision to participate should you not receive your first choice

# Reference Survey

The goal of the International Travel Studies program is to provide students with a unique opportunity to experience cultures different from their own while engaging in social and humanitarian programs in the country being visited. To assist ITS Staff in getting to know the student and gauge their participation, we would appreciate your evaluation of the student in a few areas, which are important to their success and enjoyment of the Program. Please return this form to the student in a sealed envelope. **Family members may NOT complete a Reference Survey for the student.**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reference Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reference Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Length of Time You Have Known The Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student on the following criteria by checking the appropriate ranking.

|  |  |
| --- | --- |
| **Criteria** | **Ranking** |
| **Excellent** | **Good** | **Poor** | **Unsure** |
| Self-Motivation |  |  |  |  |
| Adaptability |  |  |  |  |
| Interpersonal Skills |  |  |  |  |
| Problem-Solving |  |  |  |  |
| Leadership |  |  |  |  |
| Organization |  |  |  |  |
| Punctuality |  |  |  |  |
| Empathy |  |  |  |  |
| Ability to Attend to Instructions |  |  |  |  |

Would you recommend this student for participation in the International Travel Studies Program?

[ ]  YES [ ]  NO [ ]  YES (WITH RESERVATIONS)

 (Please indicate why in a separate letter)

**If you would like to provide any additional information regarding this student, please feel free to do so by including a separate letter in addition to this Reference Survey.**

# Reference Survey

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Length of Time You Have Known The Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please rate the student on the following criteria by checking the appropriate ranking:

|  |  |
| --- | --- |
| **Criteria** | **Ranking** |
| **Excellent** | **Good** | **Poor** | **Unsure** |
| Self-Motivation |  |  |  |  |
| Adaptability |  |  |  |  |
| Interpersonal Skills |  |  |  |  |
| Problem-Solving |  |  |  |  |
| Leadership |  |  |  |  |
| Organization |  |  |  |  |
| Punctuality |  |  |  |  |
| Empathy |  |  |  |  |
| Ability to Attend to Instructions |  |  |  |  |

Would you recommend this student for participation in the International Travel Studies Program?

[ ]  YES [ ]  NO [ ]  YES (WITH RESERVATIONS)

 (Please indicate why in a separate letter)

**If you would like to provide any additional information regarding this student, please feel free to do so by including a separate letter in addition to this Reference Survey.**