PURPOSE & EXPECTATIONS
The primary purpose of the States’ 4-H International Exchange Programs’ (States’ 4-H) chaperone is to support the exchange delegates while traveling abroad. Delegates’ needs range from questions on preparing for travel, to host family issues, to medical emergencies while abroad. Although the chaperone should build rapport with the delegates, his/her main responsibility is to be the group leader. He/she should take charge when problems arise, take disciplinary action with delegates if needed, and serve as a role model while traveling abroad and interacting with people of different cultures. Additional responsibilities include, but are not limited to, providing meet-and-greet services at the airport, helping delegates with international travel procedures, monitoring delegates during the program, and providing guidance for delegates’ concerns and issues.

CHAPERONE CRITERIA/REQUIREMENTS
• Must be at least 25 years of age at the start of the exchange
• Must be involved with 4-H
• Must have experience escorting/chaperoning and working with youth
• Should have international travel experience and/or living abroad
• Should exhibit involvement and interest in the country for which they are applying
• Must be available for the full exchange period, including any pre-departure orientation activities (e.g. conference calls, email correspondence, state/national orientations, etc.), and the day after the exchange period in case of any travel deviations or flight cancellations
• Must be available by phone and email to the States’ 4-H office and delegates starting at least 2 months prior to departure
• Must have good communication skills, especially with teenagers, demonstrating exceptional tact and sensitivity to others
• Must be flexible, able to adapt to pressure, uncertain or changing schedules, and manage embarrassing situations
• Some knowledge of local language is helpful, but not required (for Costa Rica, Spanish is preferred)
• Cannot have a child participating in the same exchange program to which the chaperone is applying

CHAPERONE ROLE & RESPONSIBILITIES
• Participate in program preparations as requested by your state coordinator and States’ 4-H Headquarters.
• Become acquainted with each delegate before the exchange (by phone, email, etc.). Chaperones are responsible for delegates from several different states.
• Comply with all 4-H procedures and policies as well as procedures and policies specific to States’ 4-H.
• Be available to resolve problems relating to any delegate while in the host country or in transit (including flexibility to accept a change in your flight schedule to stay with a delegate if a delegate’s flight is delayed or cancelled)
• Participate in all exchange activities as required (e.g. pre-departure orientations, group camp, in-country field trips, etc.)
• Demonstrate responsible behavior, a culturally sensitive attitude, and serve as a role model for delegates
• Fulfill all requirements set forth in the chaperone agreement and chaperone handbook (will be provided by States’ 4-H once selected)
• Conduct States’ 4-H Evaluations at departure debriefing.
• Submit a final program report to States’ 4-H upon returning home.
• Chaperones will be available 24/7 during the exchange period. This is not a vacation for the chaperone—it is a working trip where he/she will always be “on-call” for the delegates, but he/she will still get to enjoy the culture of another country and experience life with a local family.
• Chaperones are allowed one personal trip (maximum 2 nights, 3 days), which must be approved by States’ 4-H Headquarters and international partner prior to departure, at the chaperone’s expense. If an issue with a delegate arises, chaperones may be asked to return early or cancel/reschedule their personal trip.
Full Name: ____________________________ State: __________________________

(First name) (Last name)

Instructions: Indicate country(ies)/program(s) for which you are applying. In the program choice row, indicate the order of desire (1-5). Final acceptance will be announced in January 2018.

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<tr>
<td>Total Cost</td>
<td>$4,600</td>
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<td>Applicant Portion</td>
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Chaperone’s fee is 60% subsidized by States’ 4-H and delegate program fees (see Total Cost in table above). Fee includes domestic and international airfare, in-country expenses, homestay, meals, medical and accident insurance during national orientation and in host country, some sightseeing trips, and camp if applicable. Personal expenses such as luggage fees, passport fees, personal spending money, and gifts for host family members are the responsibility of the individual.

For state specific application deadline, payment schedule and state program fee, contact your State Coordinator for details. Applications must be turned into your State Coordinator, not to the States’ 4-H Office.

Due Dates (to States’ 4-H Office in Seattle):
December 1: Application due
Mid-Winter: States’ 4-H notifies applicants of their acceptance
February 1: Program Fee due
March 1: Medical Form and Passport Copy due

Application Checklist: Only fully completed applications will be accepted.

- [ ] Basic Information
- [ ] Additional Information
- [ ] Health & Allergy Information
- [ ] Two Reference Forms
- [ ] Introduction to Host Family
- [ ] Photos
- [ ] Past Experience
- [ ] Essay
- [ ] Letter to Host Family
- [ ] Comprehensive Release Form

States’ 4-H & Cancellation Policies:
- Program cancellations:
  - Before January 31, 2018 – $300 cancellation fee.
  - After January 31, 2018 – 100% cancellation fee.
- Airfare is non-refundable once issued (airline credit may apply, airline regulations vary).
- No donor checks are accepted to the States’ 4-H office, donors must send checks directly to the delegate.
Attach at least one photo of yourself and one of your family to this page if printing, or email them to your 4-H Coordinator.
1. Basic Information:

FULL LEGAL NAME: ________________________________
*Exactly as printed in passport* (First) (Middle) (Last)
*If applying for passport later, apply with the name exactly as written above*

Name you prefer to be called: ____________________________  Gender: _____

Age (as of departure date): _____  Birth Date: ______  (MM/DD/YY)  T-shirt Size: ______ (adult)

Contact Information:

Home Address: ______________________________________

City: ____________________________  State: ______  Zip: ____________________________

Home Phone: ________________________  E-mail: ________________________________

Cell Phone: _________________________  Work Phone: ___________________________

Best time to call: ____________________________  Can you be called at work?  ☐ Yes  ☐ no

Occupation: ____________________________

Spouse's Name: ____________________________  Work or Cell # ____________________________
(for emergency use)

Name & Age of Children: ______________________________________

Emergency Contact Name: (other than spouse) ____________________________

Relationship: ____________________________  Phone: ____________________________

2. Health & Allergy Information:

The formal medical form is not due until March 1. However, please fill out this section with any/all applicable conditions. Be as specific as possible. Follow up questions may be asked. Attach an additional page, if needed.

ALLERGIES: List all food and non-food allergies and indicate the severity, any reactions, and medication, if any, for each.

<table>
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<tr>
<th>Type of Allergy</th>
<th>Severity (1 mild – 5 severe)</th>
<th>Allergic Reaction(s) (explain severity)</th>
<th>Medication? (If yes, name and dosage)</th>
<th>Additional Information:</th>
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</table>
HEALTH CONCERNS: List physical/mental conditions, both mild and severe. Please be comprehensive.

<table>
<thead>
<tr>
<th>Condition/Illness</th>
<th>Additional Information the Host Family should be aware of:</th>
<th>Name of Medication*</th>
<th>Dosage (mg.)</th>
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*Please note that common ADD/ADHD medications such as "Adderall", are illegal in Japan. Make sure all of the medication you plan to bring is legal in the international country you are going to.

a. Any recent injuries or surgeries we should be aware of? If yes, provide a brief description: __________________________
___________________________________________________________________________________________________________

b. Are there any physical activities you are restricted from doing? If yes, list all:
___________________________________________________________________________________________________________

c. Can you climb 5 floors at normal speed with no rest? □ Yes □ No

d. Can you walk 45 minutes continuously at normal speed without difficulties? □ Yes □ No

e. Can you walk on uneven terrains for 45 minutes continuously without difficulties? □ Yes □ No

3. Introduction to Host Family:

SMOKING:
□ Non-smoking family only □ Acceptable if family member smokes outside □ A smoking family is acceptable

ANIMALS:
□ Placement in a home with any type or size of pets/animals is okay with me.

□ Although I am mildly allergic to the following animals, it’s okay for me to be placed with them:__________________________

□ I am strongly allergic to or □ afraid of the following animals. I cannot be placed with them:__________________________

DIET:

a. Do you have any special dietary needs or restrictions (check all that apply)?
□ Vegetarian □ Vegan □ Gluten Free □ Soy Free □ Dairy Free □ Other: ______

b. If you checked at least of one the boxes above:
List what you can eat: __________________________
List what you cannot eat: __________________________

c. Any other special dietary needs or restrictions?
___________________________________________________________________________________________________________
___________________________________________________________________________________________________________

INTERESTS & HOBBIES: Check as many boxes as may apply to you.

What activities do you enjoy?
□ Studying □ Shopping □ Hiking □ Camping □ Nature/Outdoors □ Movies □ Swimming □ Cooking □ Handicrafts
□ Museums □ Listening to music □ Gardening □ Bicycling □ Painting/Drawing □ Boating □ Reading □ Writing □ Dancing
□ Singing □ TV □ Computers □ Video games □ Musical instruments (types: ______) □ Animals (types: ______)
□ Sports (types: __________________________________________) □ Other activities: __________________________
Your personality characteristics:
- Tidy
- Curious
- Shy
- Emotional/Sensitive
- Cheerful
- Quiet
- Patient
- Talkative
- Laugh a lot
- Sociable
- Tolerant
- Serious/Diligent
- Other: ____________________________

What do you usually do in your free time?
- Movies
- Museums
- Reading
- Studying
- Shopping
- Participate in Sports
- Spectator of Sports Events
- Other: ____________________________

What type of TV programs do you enjoy watching?
- Educational
- Adventure
- Game shows
- Musicals
- News
- Comedies
- Drama
- Movies
- Sports
- None
- Other: ____________________________

What kind of books do you enjoy reading?
- Science fiction
- Classics
- Non-fiction
- Mysteries
- Poetry
- Textbooks
- Humor
- Fiction
- Anime
- Other: ____________________________

What type of music do you enjoy?
- Classical
- Disco
- Show-tunes
- Popular
- Folk
- Country & Western
- Jazz
- Rock
- Rap
- Hip-hop
- None
- Other: ____________________________

What qualities do you value most in people?
- Loyalty
- Kindness
- Patience
- Honesty
- Intelligence
- Sense of humor
- Decisiveness
- Politeness
- Other: ____________________________

Religion (optional): ____________________________

Please list some of your other hobbies & interests: __________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

Please list some things about the hosting country and its culture that you find interesting: ____________________________
_______________________________________________________________________________________
_______________________________________________________________________________________

HOST FAMILY REQUEST:
- Any host family assigned is acceptable.
- I request to be hosted by (we cannot guarantee that the preferred host family will be available):

<table>
<thead>
<tr>
<th>Choice #1</th>
<th>Family Name</th>
<th>Organization</th>
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<tbody>
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<td>Address:</td>
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<tr>
<th>Choice #2</th>
<th>Family Name</th>
<th>Organization</th>
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<td>Address:</td>
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<td>Phone:</td>
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If the above host family(ies) is(are) not available, any host family assigned is acceptable (if yes, check here). □
4. **Past Experience:**

   a. Have you escorted a group of youth on a trip before?  
      - [ ] Yes  
      - [ ] No  
      If yes, list the two most relevant experiences:

      | Event/Group | Approx. # of Youth | Destination | Month/Year |
      |-------------|-------------------|-------------|------------|
      |             |                   |             |            |
      |             |                   |             |            |

   b. Have you traveled internationally?  
      - [ ] Yes  
      - [ ] No  
      If yes, list below.

      | Country Visited | Length of trip | Purpose of trip | Month/Year |
      |-----------------|----------------|-----------------|------------|
      |                 |                |                 |            |
      |                 |                |                 |            |

   c. Do you have a current passport?

      - [ ] Yes – Submit a copy of photo page (with signature). The passport must be valid for three (3) months after the intended return travel date. Check the expiration date and renew, if needed.
      - [ ] No – Apply in advance. It may take as long as two months. Submit a copy of photo page (with signature) when passport is received.

   d. Have you applied for this position in the past?  
      - [ ] Yes  
      - [ ] No  
      If yes, please list countries and years applied for: _______________________________________________________

   e. Do you speak any languages other than English?  
      - [ ] Yes  
      - [ ] No  
      If yes, list your language ability below.

      Please indicate: Native Speaker - Excellent - Good - Fair - Poor - None

      | Language | Reading | Writing | Speaking | Comprehension | Years Studied |
      |----------|---------|---------|----------|---------------|--------------|
      |          |         |         |          |               |              |

5. **Additional Information:**

**AIRPORT SELECTION:**

States’ 4-H will try to honor the chaperone’s preferred local airport, but final airport selection and chaperone flight schedules will be determined by States’ 4-H with consideration for delegate air schedules. The chaperone may have extra airport connections or long layovers, which are necessary to ensure that delegates are accompanied on international flights and at gateway airports. If the chaperone elects to fly from a different airport than the one States’ 4-H assigns, he/she will be responsible for any difference in airfare. Departure could be as early as 5AM and return could be as late as midnight. **NOTE:** In general, airfare is more expensive when you choose smaller airports.

1. Airport Name __________________________  
   3 Letter Airport Code ______________

2. Airport Name __________________________  
   3 Letter Airport Code ______________

**HOSTING EXPERIENCE:**

   a. Have you hosted an international visitor?*  
      - [ ] Yes  
      - [ ] No  
      If you have hosted a Japanese student/chaperone through 4-H in the past (2016 or before) and are applying for Japan Outbound program, fill in the list below. You may be eligible for Hosting Grant (for Japan Outbound applicants only). List from oldest to the latest.

      | Visitor’s Name | Organization | Country | Year |
      |----------------|--------------|---------|------|
      |                |              |         |      |
      |                |              |         |      |
      |                |              |         |      |

   *STATE COORDINATORS ONLY: Verify the hosting record for Japan IB and initial here. ______

   a. Are you interested in hosting next year?  
      - [ ] Yes  
      - [ ] No  
      - [ ] Not sure
6. **References:**
Two references are required to complete a Confidential Chaperone Reference Form, or submit a personal letter of recommendation. Please list 2 people who may be contacted for these references.

Name: ___________________________ Position-Title/Relationship: ___________________________
Address: ___________________________
City: ___________ State: ________ Zip: ________ Phone: ___________________________

Name: ___________________________ Position-Title/Relationship: ___________________________
Address: ___________________________
City: ___________ State: ________ Zip: ________ Phone: ___________________________

I CERTIFY that all information on this application is true and complete to the best of my knowledge. I understand the purposes and objectives of States’ 4-H International Exchange Programs and agree to participate within the framework of the program.

Applicant’s Signature ___________________________ Print name ___________________________ Date ___________________________

Based on my assessment of the chaperone's application and interview details, I recommend him/her for the chaperone position in the 2018 States’ 4-H Outbound Programs.

State Coordinator ___________________________ Print name ___________________________ Date ___________________________
7. **Essay:** 1-2 paragraphs for each of the following questions. Attach an additional page if you need more room.

a. Why do you want to be a chaperone?

b. Describe your participation within the last 2 years as a volunteer or professional in counseling and leadership with teenagers.
c. Experiences in international travel and/or hosting.

d. What do you think the greatest challenge of this position will be?
8. **Letter to Host Family**: Either handwrite or type a letter to your host family introducing yourself, your family, and your interests. Describe the activities you would like to do together. This letter will be your future host family’s first chance to get to know you.