





Peru Youth Leadership Program

Student Application

PERSONAL INFO	RMATION				
Name					
La	st (Family)	Firs	st	Middle	
Current Address:					
City, State, Postal Code					
Mailing Address (if different you're your current address):					
City, State, Posta	l Code				
Home Phone			Mobile Phone		
Email					
Date of Birth (mm/dd/yyyy)			_Age at the time o	of application:	
City and Country of Birth					
Country of Citizenship or Permanent Legal Residence					
Do you have dual citizenship? [] Yes [] No					
If yes, indicate countries where you are a dual citizen:					
Gender: [] Male	[] Female [] C	Other/Prefer to Se	lf-Describe:	
Have you ever participated in an exchange program sponsored by the U.S. Department of					
State? [] Yes	[] No			
If yes, provide the name of the program and date you participated:					
PARENT/GUARDIAN INFORMATION					
Your parent or guardian must sign the application at the end					
Parent/Guardian 1					
Name				Relation to you	

Youth Leadership Program – Student Application This application is free of charge and may be duplicated.

Address (if different fr	om yours)	
Phone	Email	Occupation
Parent/Guardian 2		
Name		Relation to you
Address (if different fr	om yours)	
Phone	Email	Occupation
PASSPORT INFORMA	TION	
Do you have a valid p	assport? [] Yes	[] No
If yes, please attach a	copy of your passport to yo	ur application.
application to the pro after the program en costs to obtain a pass	ogram. However, please be ac d date, is required for particip sport if you don't already hav	
Passport Number		Expiration Date (mm/dd/yyyy)
Issuing Country		-
TRAVEL INFORMATION	ON.	
	ed to the United States?	[] Yes
If yes, please provide	a brief description of dates,	length and nature of your stay(s), and
whether you obtaine	d a visa:	
Have you ever travele	ed outside of your country?	[] Yes [] No
•	•	length and nature of your stay(s):

ACCOMMODATIONS

It is the goal of the Youth Leadership program and its partners to ensure the full and equal participation of everybody regardless of gender, race, sexual preference, disability, or otherwise. It is our policy to make necessary, reasonable accommodations to ensure that our programs are accessible.

Would you require a reasonable accommodation, as a result of a physical or mental					
impairment, to enable you to access the full benefit of this program? [] Yes [] No					
If yes, use this space below to describe accommodations that could support you on program:					
EDUCATION AND ACTIVITIES					
School name					
School type (public, private, other)					
School address					
City, State, Postal code					
Current grade Month and year you will graduate					
Academic subjects you are most interested in					
Future studies and/or possible occupations you've considered					
Please list all extracurricular or volunteer activities you currently take part in. Include how long					
you have been involved with each, and any awards or honors.					
Examples: school clubs, sports teams, youth organizations, community service activities					
leisure time activities.					

LANGUAGE

What is your native (maternal) language? If you are bilingual, please list both of your native/maternal languages

Circle the number below that best describes your spoken English skills.

- o No Practical Proficiency
- 1 Survival Proficiency
- 2 Limited Proficiency
- 3 Professional Proficiency
- 4 Advanced Proficiency
- 5 Bilingual Proficiency

Circle the number below that best describes your written English skills.

- o No Practical Proficiency
- 1 Survival Proficiency
- 2 Limited Proficiency
- 3 Professional Proficiency
- 4 Advanced Proficiency
- 5 Bilingual Proficiency

SHORT ESSAYS: Please respond to the following short essay questions in one paragraph What motivates you to apply to the Youth Leadership Program? How will your participation in the program help you address the issues currently facing your community?

You will be required to do a community service project individually or in a small group when you return home. What current issues does your community face? What idea(s) do you have for a project that would improve your community?

In what ways are you an effective leader? Using two examples, describe how you are a leader in your school, community, or home.

PARTICIPANT AGREEMENT/PARENTAL CONSENT

the pre-departure orientation and follow-on activities. I also understand that I must remain with the program throughout the entire exchange and that personal travel within the United States during the program is not permitted.					
Applicant Signature	Date				
I permit my child to apply for and, if selected, t	to participate in this program.				
Parent/Guardian 1 signature(s)	Date				
Parent/Guardian 2 signature(s)	Date				

By signing below, I verify that all the information in this application is true. I agree that if chosen to participate, I will participate in ALL program activities in the United States and Peru, including