

**NEW BRUNSWICK – QUÉBEC  
STUDENT EXCHANGE**

**STUDENT APPLICATION**

**March 2014**

**\*NEW FOR 2014-2015:**

IN ORDER FOR STUDENTS TO BE ACCEPTED INTO THE EXCHANGE PROGRAM, FAMILIES MUST PROVIDE A CURRENT CRIMINAL RECORD CHECK FOR EACH MEMBER OF THE HOUSEHOLD. COSTS FOR THE CHECK WILL BE REIMBURSED TO FAMILIES. THIS IS ONLY NECESSARY AFTER A SUITABLE EXCHANGE PARTNER HAS BEEN IDENTIFIED.

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for 2014-2015

STUDENT APPLICATION FORM

This application may be completed electronically, saved, and printed. Alternatively, the document may be printed and completed in black ink (please print clearly).

STUDENT INFORMATION

Family name

First name(s)

Address

City

Postal Code

Telephone

Student Email

Please attach a color copy of a recent photograph

Date of Birth (yyyy-mm-dd):

Gender: Male

Female

Age on September 01, 2014  years  months

Height (cm):

In the 2014-2015 school year, I will be in (please check one): Grade 10  Grade 11

PARENT INFORMATION

Name of father or male guardian

Email Address

Home Phone Number

Work Phone Number

Name of mother or female guardian

Email Address

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Home Phone Number

Work Phone Number

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SCHOOL INFORMATION

Name and address of school you will be attending September, 2014

Postal code

School principal's name

School phone number

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GENERAL INFORMATION

1. Family

Indicate members of the family who will be living in the home during the Québec student exchange visit. Please check as many as are applicable.

Father  Mother

Sisters  How Many?  Ages?

Brothers  How Many?  Ages?

Others  Specify

2. New Brunswick Family Living Accommodations

Would your family accept a mixed exchange (girl-boy)? Yes  No

Describe your living accommodations:

House  Apartment  Mobile Home

Other  Specify:

Will your twined exchange student have a separate bedroom? Yes  No

Will your twined exchange student share a bedroom? Yes  No

**Note:** Families must provide a separate bed for the exchange student in order to participate in the exchange program. If a separate bed cannot be provided, the exchange will not be considered.

3. Friendship

3.1 Can you easily meet young people at places other than school? Yes  No

If yes, describe what you do to facilitate this process.

**Note:** It is necessary that all family members enthusiastically accept the young Francophone into their home.

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3.2 Boyfriend/Girlfriend

Do you have a boyfriend/girlfriend who you see regularly? Yes  No

If yes, how will a three month separation affect you?

**Note:** *While the Québec student is in your home, he/she must be your first priority. Other interests come after your twined exchange student. However, the exchange partners do not have to be together constantly. The Québec student will be living in your home from September to December and you will consider him/her as a member of your family.*

4. Health

4.1 General

Do you have any special eating habits (e.g., vegetarian or gluten free)? Yes  No

If yes, please provide details.

Are you receiving treatment for a chronic condition (other than allergies)? Yes  No

If yes, please provide details.

Do you have any mobility or sensory requirements? Yes  No

If yes, please provide details.

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4.2 Allergies

Do you have any allergies? Yes  No

Are you receiving medical treatment for your allergies? Yes  No

Specify any living conditions you would be unable to tolerate because of your allergies (e.g., house pets, plants, chemicals, farms). Please be **specific**.

If the only possible exchange was with a family where these elements were present, would you accept the exchange? Yes  No

5. Cigarette Smoking

Do you smoke? Yes  No

Does anyone in your home smoke? Yes  No

If yes, list all persons who smoke.

Would your family accept an exchange student who smokes? Yes  No

Would you accept to live in a home where someone smokes? Yes  No

Comments/restrictions:

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6. Animals

Do you like pets/animals? Yes  No

If no, would you accept to live with a family where there are pets/animals? Yes  No

Do you have pets/animals? Yes  No

If yes, specify the kind and if they live inside or outside the home:

7. Religion (Optional)

Is it important to you to attend religious services? Yes  No

If yes, which religious denomination do you prefer?

Would you accept being twinned with an exchange student who does not attend religious services?

Yes  No

**Note:** *In the smaller communities in Québec, the only available religious institution may be Catholic; in all cases, choice of attendance to religious services should be the decision of the visiting student.*

8. Music

What kind of music do you like? Please prioritize (1 being the most preferred, 10 being the least preferred)

Classical  Popular  Western  Rock  Rap

Hip Hop  Heavy Metal  Jazz  Alternative  Dubstep

Other:

What kind of music do you dislike?

Are there musical instruments in your home (e.g., piano)? Yes  No

If yes, please specify:

Do you play a musical instrument? Yes  No

Specify:

Do you take music lessons? Yes  No



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9. Social, Cultural and Intellectual Activities

9.1 Movies

Do you enjoy going to the movies, watching online/streamed movies (e.g. Netflix)? Yes  No

If yes, how often?

What type of films do you prefer?

9.2 Reading

Do you enjoy reading? Yes  No

What genre do you prefer?

9.3 Computers

Do you use a computer at home? Yes  No

If yes, identify the purpose and describe how often.

Email  School Work  Games  Social Media

Comment:

9.4 Dancing

Do you enjoy dancing? Yes  No

Are you taking dance classes? Yes  No

If yes, please specify:

Jazz  Modern  Classical  Other

9.5 Drawing and Painting

Do you paint or draw? Yes  No

Comments:

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9.6 Identify the traits that best describe you: Artistic  Intellectual  Athletic

What are your hobbies or pastimes?

9.7 Other Activities

Are you a collector (e.g., stamps, sports cards, coins)? Yes  No

If yes, please specify:

How many hours a week do you devote to:

Television

Video Games

Shopping

Other

9.8 Sports

Describe the value of sports in your life: Very important  Important  Of little importance

Do you participate in some sports? Yes  No

List sporting events in which you have participated during the last twelve months by order of importance. Indicate the approximate number of hours per week and check the appropriate box to indicate the frequency: Regularly (on a weekly basis during season) or occasionally (on a monthly basis).

TEAM SPORTS: (hockey, volleyball, soccer, basketball, etc.)

Team Sport	Hours	Regularly	Occasionally
1. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

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INDIVIDUAL SPORTS: (e.g., swimming, skiing, cycling, martial arts, aerobics, horseback riding)

Individual Sport	Hours	Regularly	Occasionally
1. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. <input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Previous Exchange Experience

Have you previously participated in a student exchange? Yes  No   
If yes, describe:

**Note:** Due to the nature of exchange programs, students should only apply for one exchange program at a time. This will better ensure a successful exchange.

11. Knowledge of French

What is your competence in French?

**Beginner:** Can greet people and speak in short sentences but not enough to carry on a conversation

**Tourist:** Can order meals, give directions and read a little

**Spectator:** Can understand radio and TV programs; can read but hesitant to talk

**Bilingual:** Can understand and use French in most situations and appreciate a joke

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Have you had, and/or do you currently have any other opportunities to speak French outside of school? Please explain.

Do you or your parents speak a language other than English at home? Yes  No

If yes, which languages?

**Note:** *The Québec students come here to learn English. Therefore, while the Québec student is in your home, it is very important that English be spoken. Similarly, during your stay in Québec, you will speak French and limit interactions in English to an absolute minimum, be it in person or by telephone.*

12. Letter to Future Twin

Write a detailed letter, introducing and describing yourself to a possible exchange partner. Include information about your personality, character, tastes, qualities, faults, favorite pastimes, and so forth. **\*This section is really important as it will have an impact on the success of your twinning\***

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Describe the kind of partner you would like to have (list important qualities and interests).

Are there any characteristics in an exchange partner which you would find difficult to accept?

*Although your family may be strongly urging you to participate in the student exchange program, your personal desire to participate in the exchange program is critical. It is important to be committed to the exchange and to follow through until April, regardless of the challenges you may encounter, either in Québec or New Brunswick. Once a twinning is complete, a withdrawal will carry serious consequences for the exchange partner in the other province. He/she may not be able to participate due to your decision. EXPECT TO BE TWINNED WITH SOMEONE WHO MAY HAVE DIFFERENT INTERESTS AND PERSONALITY TRAITS. Successful twinning depends on understanding, patience and effort.*

13. Goals

Briefly state what you want to accomplish through the exchange.

What motivated you to participate in this exchange?

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Attach appropriate photos to boxes as indicated below:

<p>A photo of the outside of your residence (exterior)</p>	<p>A photo of the inside of your residence (interior)</p>
<p>Your family</p>	<p>Your Choice (Your friends, your pet, your favorite activity, etc.)</p>

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CONSENT AND COMMITMENT: STUDENT, FAMILY AND SCHOOL

STUDENT:

I understand the provincial objectives of the exchange program and agree to fulfill my responsibilities as an exchange host and exchange partner to the best of my abilities.

I also agree that during the period of the exchange, my first priority will be to my exchange partner, and other relationships (e.g., boyfriends/girlfriends) will have second priority.

I will not withdraw from the program unless extenuating circumstances prevail and full consultation with my partner, school and exchange coordinator has taken place.

I understand that acceptance of my application does not guarantee that I will be able to participate in the program, since a suitable twin may not be found.

Should I default on any of the above, the exchange may be terminated and my return home will be at the expense of my parents/guardians.

Family comments or concerns (if any):

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Student Signature

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Date

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PARENT(S) / GUARDIAN(S):

I/we agree to participate in the exchange program and will endeavor to make the experience as successful as possible.

I/we agree to participate in the exchange program by sending our son/daughter to Québec, unless the coordinating officer authorizes otherwise.

I/we will be responsible for special return travel costs and arrangements where an exchange is terminated by our choice; or as determined by the coordinator on the basis of student behavior detrimental to the objectives of the program.

- 1. I/we agree to pay a \$250 non-refundable deposit if a suitable twin is found. The participation will only become official after receipt of this deposit.**
- 2. I/we agree to provide a current criminal record check (costs to be reimbursed by the Department of Education and Early Childhood Development) for all members of our household if a suitable twin is found. The participation will only become official after receipt of this documentation.**
- 3. I/we agree that the information contained in this application may be shared with the program administrators and potential host families.**

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Parent's/Guardians Signature

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Date

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Parent's/Guardians Signature

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Date



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LIAISON TEACHER RECOMMENDATION:

I certify that the family has been interviewed in the home according to the schedule attached and that the family setting is conducive to and supportive of a successful educational exchange.

I recommend this candidate. He/she is serious, well-motivated, mature, and committed to the exchange; he/she will be an excellent representative for New Brunswick.

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Liaison Teacher's Signature

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Date

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Print Name

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School

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PRINCIPAL'S RECOMMENDATION:

I recommend this candidate as he/she is serious, mature and well-motivated. The family has been interviewed and is supportive of a successful educational exchange. The home and family life are also conducive to a successful exchange. The school agrees to accept a Québec student for the three-month exchange period and to provide all necessary school textbooks for the student and to arrange travel by school bus where warranted.

The school has appointed a New Brunswick liaison teacher who will provide support and counseling for the Québec and New Brunswick student as necessary.

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Principal's Signature

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Date

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Print Name

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School

*Please note that if this application is not fully completed, the candidate will not be considered. The interview schedule must also be completed by the liaison teacher. The candidate and his/her family must be interviewed in the home as a part of the application process.*