



Village Application Procedure

Links for all forms can be found at www.dfwcisv.org in the forms tab.

Please email all forms and references to CISVDFWVillage@gmail.com

Please mail fees to:

Joy Mock

2801 Pine View Drive

Grapevine, TX 76051

A. Application portion due directly from PARENT by November 15, 2018 :

1. Youth Delegate Application Form
2. Supplement for Village Applicants
3. Parent Commitment Form
4. Application Fee (\$50 check payable to CISV DFW)
5. 20 hours of family volunteer activity for CISV DFW (see information below, D)

B. Application portion due DIRECTLY from REFERENCES by December 1, 2018:

6. 3 Youth Delegate Reference Forms (2 pages each)
 - o School Teacher
 - o School Principal, Director, or Grade Coordinator
 - o Adult Leader/Teacher/Coach

We believe that a more accurate reference can be given from someone who has had an entire year to get to know your child since these references are due so early in the current school year. Accordingly, one reference must be that of a school teacher from your child's previous school year. Likewise, the second reference must be that of a school principal, director or grade coordinator from your child's previous school year. The third reference we request is that of an adult leader, coach or sponsor of some activity in which your child is currently, or recently has been, a participant. The activity may be school related, but not necessarily.

In order to maintain confidentiality, we must receive 3 separate Youth Delegate Reference Forms DIRECTLY from 3 separate references for each applicant. Please print out the form three times; fill in this information on the reference forms:

1. Child's name
2. Program Applying for- Village
3. Email address - CISVDFWVillage@gmail.com
4. References due by **December 1, 2018**

C. Mandatory Selection Overnight in January:

As part of the application process, your child will need to attend a mandatory selection overnight on **January 25-26, 2019**. Further details will be provided upon receipt of your completed application.

D. Volunteer requirements for the program year:

CISV DFW is an all volunteer organization. We expect each of our families participating in traveling programs to volunteer a minimum of 20 hours per participating program year. This is 20 hours in addition to your youth's traveling program delegation meetings. We define volunteering as helping with our hosting programs and local activities. Part of our application package includes a Parent Commitment form with a volunteer interest survey. Your child's application is not complete without the return of this form. We will be contacting families based on this interest survey. Thanks for your support of CISV DFW!

Questions Contact:

cisvdfwvillage@gmail.com

Sandra Burrus

972-632-8218

Amy White

214-762-9057

Tina Mercurio

972-898-2477

Village Family Responsibilities for Delegates:

Hopefully the below information gives you a better understanding of procedures once a child is selected and will travel.

This information appears at the end of the Village Supplement Application.

- Host meetings in the home in preparation for the Village experience and as a follow-up after the delegation returns.
- See that the delegate attends scheduled delegation meetings.
- Attend parent meetings and participate in Chapter activities.
- Pay all fees designated by the Chapter by the established deadlines. Approximate cost is \$4200.
- Complete the delegate's passport and visa application, if applicable, within two weeks of selection notification.
- Submit the required CISV Health and Legal/Insurance forms by the established deadlines and obtain any immunizations deemed necessary by the public health department.
- Decide with the leader and other parents the amount of spending money to take to the Village and comply with that decision.
- Provide emergency money as determined by the delegation leader and Chapter with the understanding that emergency money not used will be returned to parents.
- Cooperate fully with the delegation leader and encourage your child to accept the leader's authority during the preparation and travel phases and at the Village.
- Be informed about the CISV program so that you can provide a positive and supportive atmosphere for your child.
- Help your child understand that he/she is representing the Chapter and the United States as a goodwill ambassador. If a child's behavior is unacceptable at a Village it is the parent's responsibility to make arrangements to bring the child home. According to National CISV policy, children under 16 may not travel unless accompanied by an adult.
- Assist your child in sharing the Village experience at a Chapter meeting and at other non-CISV meetings for publicity purposes if asked.
- Participate in evaluations of the Village experience as requested by the Chapter.
- Support and participate in Chapter activities throughout the year and keep informed of Junior Branch activities so that the delegate can participate.



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Parents:

Electronic Communication/Publication Restrictions (permission assumed unless noted below)
 No personal information will be distributed unless your child is selected as a participant

- Check the box if you do not want your child's communication information distributed locally unless your child is selected as a participant
- Check the box if you do not want your child's communication information distributed locally within CISV by mail
- Check the box if you do not want your child's communication information published on an official CISV website
- Check the box if you do not want your child's photo/image published by CISV in official publications and/or websites

Youth Delegate Application Form

First Name		Last Name	
Program applying for		Gender	
Birth Date			
Number & Street			
Town / City			
Area / State / Province			
Country		Postcode / Zip code	
	Country Code	Area Code	Local Number
Home Tel			
Home Fax			
Mobile Number			
Office Tel			
Office Fax			
E mail			
Name of School		Grade Level	
School Principal's Name			

Language Ability: Indicate speaking, reading, listening with understanding

Language _____ Fluent Good Fair

Language _____ Fluent Good Fair

What are your interests and hobbies?

What are your activities outside of school?

What is your CISV background?

How did you learn about CISV?

Parent or Guardian Information

Mother's/Guardian's Name

Occupation _____

Business Name and Address

City _____ State _____ Zipcode _____

Business Phone: _____ Fax: _____

E-mail address: _____

Home Address and Phone:

(If different from that of youth applicant)

Father's/Guardian's Name

Occupation _____

Business Name and Address

City _____ State _____ Zipcode _____

Business Phone: _____

E-mail address: _____

Home Address and Phone:

(If different from that of youth applicant)

Statement of Parents/Guardians

Why do you want your child to be a delegate?

Mother's response:

Father's response:

In what volunteer activities do you participate?

Mother's response:

Father's response:

Would you be able and willing to assist in volunteer service for CISV? Please explain.

Mother's response:

Father's response:

Medical History Information

Is your child currently taking any prescribed medications? Please explain.

Would you be willing to provide a statement from your child's physician as to his or her physical condition?

Please list any allergies, health or dietary restrictions and their effect on your child's daily life.

National Code of Conduct Agreement

I _____ (name of delegate) do agree with my local CISV Chapter and the National and International officers of CISV, to participate fully in (circle CISV Program - Village, Interchange, Seminar Camp, Summer Camp or Youth Meeting). I will abide by the guidelines established by CISV International, INFO FILE R-7 (9008), in such manner that will enhance our life together and foster courtesy and understanding between us all. I will not bring or use illegal drugs. If I am under the age of 18 and smoke, I will bring a signed letter of consent from my parents or guardians. If I am in a country where there is no legal age for drinking and I am under 21, I will furnish a signed letter of consent from my parents or guardians. In all cases I will observe the wishes of my host family regarding drinking and smoking as a matter of courtesy. I will observe such sexual morals and behaviors that will not embarrass or injure others (such behaviors having been discussed with my parents/guardians). I understand I will be expected to participate in all CISV activities (games, culture sharing, crafts, singing, dances, meetings and workshops, etc.) and I agree to participate to the best of my ability. I further agree to represent my CISV Chapter in such manner that is consistent with the values of my home, community and country.

I do understand that if I break my agreement, I may be removed from the program at my own expense.

Signature of applicant: _____ Date: _____

Signature of mother/guardian: _____ Date: _____

Signature of father/guardian: _____ Date: _____

Signature of chapter representative: _____ Date: _____

National Travel Policy Delegation Travel

1) Village, Summer Camp, and Interchange delegations shall travel to and from the site of the approved CISV activity as a group. Travel shall be direct and continuous to and from the CISV activity site. No side trips shall be permitted. No layover in excess of 24 hours shall be permitted unless common carrier schedules require otherwise. Delegation itineraries must be approved by the local Chapter.

2) Penalties - Violations of Section 1 will result in disciplinary action against the Chapter or Steering Committee pursuant to the complaint procedure (83-BOT-2) of CISV, Inc.

3) Individual travel (as in the case of Junior Counselors and Seminar Camp participants) other than to and from the site of an approved CISV activity shall be deemed non-CISV travel. CISV assumes no responsibility or liability for an individual while on a side trip or layover in excess of 24 hours.

We understand the CISV policy listed above and if selected, agree to abide by it.

Signature of applicant: _____ Date: _____

Signature of father/guardian: _____ Date: _____

Signature of mother/guardian: _____ Date: _____

We further understand that:

1) Information we have provided in this application may be verified by contacting individuals and agencies other than those listed in this application.

2) We release and hold harmless any individual or organization that provides additional information about us to CISV. We also agree to hold harmless any officers or volunteers of CISV International, CISV USA, or the local Chapter of CISV.

3) By signing this application form we confirm that all the information we have given is true and complete.

Signatures:

Signature of applicant: _____ Date: _____

Signature of father/guardian: _____ Date: _____

Signature of mother/guardian: _____ Date: _____

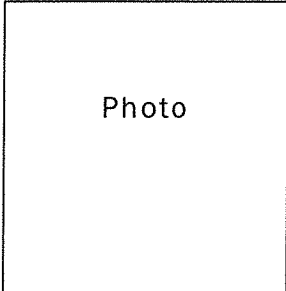
Note to ALL Youth Applicants Thank you for your interest in Children's International Summer Villages. Please complete entire application including the supplement for the specific program in which you would like to participate. The supplements outline additional responsibilities unique to each CISV program. Please provide each of your references with a copy of the appropriate reference form accompanying this application.

Village Applicants complete Supplement VYD (Village delegates must be 11 years of age)
Interchange Applicants complete Supplement IYD (Interchanges are for youth ages 12-13, 13-14 or 14-15)



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Photo

Supplement VYD

Village Youth Delegate Application Supplement

Applicant's Name _____

Complete the first section by filling in the blanks or checking all the answers that describe you best. Please use your own handwriting.

My Family and Home:

I have _____ brothers and _____ sisters. Their ages are _____.

We play _____

like do not like to play alone. I help at home by _____

The thing I like to do best at home is _____ My favorite food is _____

My least favorite food is _____ I like do not like to try new things to eat.

My Friends:

My best friend is _____ I like him/her because _____

I would rather play at my house at my friend's house

because _____

My Pets:

I have a pet _____ I do do not help take care of my pet(s).

I do not have a pet because _____

My Travels and Adventures:

I have traveled by: bus car airplane boat train bicycle pony I have visited: circus zoo farm hotel dairy

airport fire station factory museum

other _____ The best

adventure I ever had was _____ I like to read about

_____ The best book I ever read was _____

I have _____ books of my own at home. I get do not get books from the library.

Movie and TV Favorites:

I watch _____ movies each month. I listen to _____ on the radio. I watch _____ TV programs every day. My favorite TV show is _____

Likes and Dislikes:

I like _____ I do not like _____ I am afraid of _____
_____ I am not afraid of _____ Things I like best about school are _____ When I have nothing else to do I like to _____

My Wishes:

When I grow up I want to be _____ If I could have three wishes, they would be:

1. _____
2. _____
3. _____

Please answer the following questions in your own handwriting:

Have you attended a camp? _____ If so, what type of camp? _____ What did you like and dislike about the camp? _____

Describe any other experiences away from home without your parents. _____

Describe a recent happy day in your life. _____

How do you imagine you will feel about being away from your home and family for one month? _____

Please read and complete the third page of this supplement outlining Village family responsibilities.

Village Family Responsibilities:

- Host meetings in the home in preparation for the Village experience and as a follow-up after the delegation returns.
- See that the delegate attends scheduled delegation meetings.
- Attend parent meetings and participate in Chapter activities.
- Pay all fees designated by the Chapter by the established deadlines.
- Complete the delegate's passport and visa application, if applicable, within two weeks of selection notification.
- Submit the required CISV Health and Legal/Insurance forms by the established deadlines and obtain any immunizations deemed necessary by the public health department.
- Decide with the leader and other parents the amount of spending money to take to the Village and comply with that decision.
- Provide emergency money as determined by the delegation leader and Chapter with the understanding that emergency money not used will be returned to parents.
- Cooperate fully with the delegation leader and encourage your child to accept the leader's authority during the preparation and travel phases and at the Village.
- Be informed about the CISV program so that you can provide a positive and supportive atmosphere for your child.
- Help your child understand that he/she is representing the Chapter and the United States as a goodwill ambassador. If a child's behavior is unacceptable at a Village it is the parent's responsibility to make arrangements to bring the child home. According to National CISV policy, children under 16 may not travel unless accompanied by an adult.
- Assist your child in sharing the Village experience at a Chapter meeting and at other non-CISV meetings for publicity purposes if asked.
- Participate in evaluations of the Village experience as requested by the Chapter.
- Support and participate in Chapter activities throughout the year and keep informed of Junior Branch activities so that the delegate can participate.

Family Acknowledgement:

We are aware of CISV's policy for selection, preparation, training and the responsibilities of Village delegates and their families. We are prepared to let our son/daughter participate in a CISV Village Program and regard him/her both physically and psychologically fit to participate. We are also prepared to support our son/daughter in his/her future involvement in CISV.

Signature of Mother/Guardian _____ Date: _____

Signature of Father/ Guardian: _____ Date: _____

Applicant Signature: _____ Date: _____

Parent Commitment Form

How can CISV operate these complex programs as an all-volunteer organization?
Who does the work?

Volunteers like you and me! Thousands of dedicated people devote many hours to CISV programs around the world because they have experienced the special, rewarding feeling that comes from making new friends around the world and learning about other cultures and ways of life. These volunteers want others to experience the same feeling, and they want to give something back to the organization that means so much to them and to their children. When your family becomes involved in CISV, parents will have the responsibility to serve as a volunteer in some capacity. There are dozens of jobs that must be done... some big, some small, but all are very important to our success. We must have families who are willing to do their share so all the work is not done by just a few. Sixty countries...182 Chapters worldwide... 23 USA Chapters...3,500 members in the USA alone. We hope you too, will be a part of CISV and see why so many care so much!

In order for a child to be considered for selection as a delegate for a CISV program, their family commits to the following minimum volunteer activities on behalf of the Dallas Ft. Worth Chapter for the year in which their child is attending a program:

1. Attend all meetings of your child's delegation that include parents;
2. Do your family's fair share of the work for your child's delegation;
3. Complete and submit all required insurance and health forms by the due date;
4. Support your child's adult leader
5. Attend the Spring and Fall General Membership meetings;
6. Attend and support the Fundraisers
7. Host a delegate for our current year hosting program(s) for a period of 2-3 days*.
8. Volunteer to help with the current year hosting program(s);
9. Help recruit delegates and leaders/staff members for future CISV programs;
10. Become an active member of at least one CISV DFW working committee.

I commit to the above minimum requirements.

Father

Mother

Date

Date

* It is a special honor to host a delegation in your home. We have many long-time members of CISV DFW who host delegations. There is a possibility that your family will not be assigned a delegation to host, but you should be prepared to host if asked.



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Youth Delegate Reference Form

CISV, Inc.

The following is a recommendation for _____, a youth applicant for a CISV program.

(APPLICANT'S FIRST & LAST NAME)

The youth is applying for (please check one):

- Village (Peace education camp for 11 year olds)
- Step Up (Peace education camp for 14-15 year olds)
- Interchange (Peace education exchange program for 12-15 year olds)
- Seminar Camp (Peace education camp program for 17-18 year olds)
- Youth Meeting (Peace education camp program for 12-13, 14-15, 16-18, 19+ year olds)

If selected, the youth applicant will represent both the United States and his/her own area in an international setting. The local CISV USA Chapter requests your help in identifying applicants who exhibit leadership qualities and can represent their own culture successfully.

This form must be completed and emailed to the following email address no later than December 1, 2018.

Chapter contact person's e-mail address: cisvdfwvillage@gmail.com

Chapter contact person's phone number: Sandra Burrus 972-632-8218 or Amy White 214-762-9057

.....

Name of the adult completing this reference form: _____

Occupation: _____ Home/Cell Phone: _____ E-mail address: _____

Capacity in which you know the youth applicant: _____

If you are the youth applicant's current teacher, what is your school's name? _____

What is your school's phone number? _____

Length of time you have known the youth applicant: _____

Please check all traits in the list below that you consider to be characteristic of the youth applicant.

Then circle the five adjectives you feel describe the youth applicant's greatest strengths.

- mature independent responsible expressive accepting discerning shows initiative optimistic pessimistic responsive
- cooperative cautious curious attentive practical helpful participates needs coaxing caring spontaneous reticent
- open-minded respects adults respects peers follower leader team player fair-minded organized dependent creative
- quiet secure vivacious sensitive forgetful introspective friendly articulate accepted unusual sincere healthy
- confident tolerant compromiser intense mild-mannered patient hurried studious motivated disrespectful athletic
- artistic outgoing inward intolerant flexible follows direction fun conscientious shares talkative adventurous
- _____

Use this space to elaborate on any of the traits circled above or to share any concerns. **Keep in mind that we are looking for youth who complement each other when forming program delegations. There is no set profile of a "typical" or "ideal" youth delegate.**

Do you know of any special talents or experiences that would help this youth applicant contribute to an international program?

To the best of your knowledge, does this youth applicant have any emotional or behavioral characteristics that would interfere with his/her successful completion of a CISV program? _____

Behaviors that are never acceptable in any CISV program include illegal acts, alcohol/drug abuse, dishonesty, prejudice or intolerance, violence or lack of self-control, sexual contact, verbal abuse of others, and inability to handle a reasonable amount of stress. If you have seen the youth applicant exhibit such behaviors, please explain in the space below or call the Chapter contact person at the phone number listed on the front of this form.

The information provided above has been thoughtfully and honestly given, based on my knowledge and perception of the youth applicant. I understand that the information will be kept confidential and will be used by the local CISV Chapter in the evaluation of the youth applicant.

Signature: _____

Date: _____