

ASPEN SISTER CITIES COMMITTEE
Youth Exchange Application

Please type or clearly print the following information:

FULL **LEGAL** NAME (as it would appear on a passport) _____

OTHER NAME (if legal name is not used) _____

MAILING ADDRESS _____

PARENTS' NAMES _____

PARENTS' ADDRESS (if different from above) _____

DAY TIME PHONE _____ EVENING PHONE _____

FAMILY E-MAIL ADDRESS: _____

CURRENT SCHOOL _____ BIRTHDATE _____ GRADE _____

HONORS _____

HOBBIES, ACTIVITIES, INTERESTS _____

COMPETITIVE SPORTS THAT YOU PLAY _____

PREVIOUS INTERNATIONAL TRAVELING EXPERIENCE _____

On a separate piece of paper please respond to the following question. Your answer may be as brief or as long as you feel appropriate. Please type or clearly write your response and staple it to the top of this application. Please make sure your name is on the stapled sheet.

AFTER DOING A LITTLE RESEARCH, WRITE ABOUT SOME OF THE SIMILARITIES AND DIFFERENCES YOU FOUND BETWEEN ASPEN AND THE SISTER CITY YOU **MOST** WANT TO VISIT

List two choices (in order of preference) of city you want to visit. If you only have one choice, you do not need to list another 1. _____ 2. _____

****PLEASE STAPLE A RECENT PICTURE OF YOURSELF WITH YOUR FAMILY TO THIS APPLICATION AND KNOW THAT IF A SCHOLARSHIP IS BEING REQUESTED, THE SCHOLARSHIP APPLICATION MUST BE SUBMITTED WITH THIS FORM**