



Application for Alternative Non-International Travel Cultural Experience Form

Student name _____ Date _____

Student email _____

Current grade _____ YOG _____ Guidance counselor _____

Student Address _____

Tel # _____

Student signature _____ Date _____

Parent/guardian name _____

Parent/guardian signature _____ Date _____

Program name or host organization: _____

Program website: _____

Program description (mission and objectives): _____

How will you be challenging yourself to connect and interact directly with the culture and the people?
