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APPLICATION FOR AN

**IFYE 2025**

Exchange program

**COUNTRY** APPLIED FOR: .............................................................First Choice

.............................................................Second Choice

Planned date of arrival: …………………………..

Planned date of departure: …………………………

**PLEASE TYPE YOUR APPLICATION**

Information you provide in this form will be shared with our partner country

and will be your host/s first impression of you.

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| **NAME:** | | **ADDRESS: ESTONIA** | |
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| **AGE:** | **DATE OF BIRTH:** |  | |
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| **(MOBILE) PHONE NUMBER** | | **ANY ALLERGIES / CONDITIONS WHICH MAY AFFECT YOUR HEALTH:** | |
| **E-MAIL** | | **ANY SPECIFIC DIETARY REQUIREMENTS:** | |
| **Do you use WhatsApp?  Other (FB, Insta) if you use:** | | **BLOOD TYPE:** | |
| **PRESENT OCCUPATION:** | | **PASSPORT NUMBER:** | **& EXPIRY DATE:** |
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| **EDUCATION & TRAINING:** | | **LANGUAGES SPOKEN and level of understanding** (levels: **v**ery good, good, little)**:** | |
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| **T-SHIRT SIZE:** | |  | |
| **EMERGENCY CONTACT:**  Name:  Relationship:  Telephone:  E-mail: | | **COUNTRIES PREVIOUSLY VISITED**  **FAMILY HOLIDAYS:**  **OTHER:**  **YOUTH EXCHANGES:** | |
| **Describe your 4H/ Landjugend/ Young Farmers Club experiences/ background:** | | | |
| **Describe your home and family** (members, age, occupation, what they like to do): | | | |
| **Describe yourself and how you spend your leisure time** (add interests/hobbies). Anything you want your host-families to know about you. | | | |
| **Farm experiences /agricultural involvement** (have you lived on a farm, size of the farm and type etc; interests in agriculture): | | | |
| **Things you would like to see/experience/study in a Host Country** (special activities,special wishes). | | | |
| **Write a short motivational letter, what makes you the best candidate? Why do you want to take part in the IFYE exchange program?** | | | |
| **PLEASE NOTE YOU WILL BE REQUIRED TO:**   * **BEFORE THE EXCHANGE JOIN YOUTH ORGANISATION ESTONIAN 4H AS A MEMBER (FEE IS 3 euros) AND PAY 20€ PROGRAM PARTICIPATION FEE** * **DURING EXCHANGE KEEP IN TOUCH WITH THE COORDINATOR AND SEND INFORMATION** * **AT LEAST A MONTH AFTER YOUR TRIP COMPLETE AND FORWARD FEEDBACK (with pictures) ABOUT YOUR EXCHANGE AND EXPERIENCES TO ESTONIAN IFYE COORDINATOR SO IT CAN BE USED FOR PROMOTIONAL PURPOSES** * **ESTONIAN 4H CAN USE PHOTOS ABOUT YOUR EXCHANGE FOR PROMOTIONAL PURPOSES**   **NB! The participant of the IFYE program must cover the travel expenses to the selected country, must have health and travel insurance and other necessary documents requested by the host country.** | | | |
|  | | | |
| Date: ……………………………..……. | | | |

**Please send application form of your IFYE coordinator Annika Kallasmaa**

**to the following email address:** [***ifye@eesti4h.ee***](mailto:ifye@eesti4h.ee)

**as early as possible, and latest Sunday 13th of February 2025!**