



Rotary International District 5960 Group Cultural Exchange Team Member Application

Before completing this application, please read the *Group Cultural Exchange Information*. This information offers a general overview and the mission statement of the Group Cultural Exchange program. Candidates should be fully aware of the program's eligibility criteria and objectives before applying.

Please print or type. Do not use initials.

This completed application must be submitted to the local Rotary club sponsoring your candidacy. Once approved by your local Rotary Club, GCE team member candidates applications should be submitted directly to the Rotary International District 5960 Office, 2233 Hamline Ave N, Suite 620, St Paul MN 55113.

CONTACT INFORMATION

Name in full (as it appears on your passport)

FIRST (GIVEN) _____ MIDDLE _____ LAST (FAMILY) _____
 Male Female Date of Birth ____/____/____ (DD/MM/YYYY)

Mailing address (required)

NUMBER AND STREET _____
CITY/TOWN _____ STATE/PROVINCE _____
POSTAL CODE _____ COUNTRY _____
HOME TELEPHONE _____ OFFICE TELEPHONE _____
FAX _____ E-MAIL _____
Country of Citizenship _____ Country of Birth _____

Person to notify in case of emergency

RELATIONSHIP _____
NAME _____ TELEPHONE _____
ADDRESS _____
FAX _____ E-MAIL _____

TEAM MEMBER APPLICANT'S CERTIFICATION

If I am selected to be a member of the district GCE team, I agree to the following conditions of award. I will:

Predeparture

- Obtain and pay for insurance valid and payable in the country(ies) in which the team will travel and visit. The insurance coverage must extend from the date of departure through the official end of the trip. District 5960 requires a **minimum of: US\$250,000** for medical care and/or hospitalization for basic major medical expenses, including accident and illness expense, hospitalization, and related benefits; \$50,000 for emergency medical evacuation; \$10,000 for accidental death and dismemberment; and \$20,000 for repatriation of remains. Please note that higher amounts are recommended, as well as insurance coverage for luggage and personal items. By requiring insurance herein, Rotary International/The Rotary Foundation does not represent that these coverages and limits will necessarily be adequate to protect the Participant. **Participants should consult with an insurance professional to determine which coverages and limits will be adequate to cover them in the geographical location(s) visited. Rotary International/The Rotary Foundation/Rotary Intl District 5960 do not provide any type of insurance to the Participants of these programs.**
- Complete, sign, and return to the district GCE chair the official **Certification of Insurance Coverage** (included in the *Group Cultural Exchange Guidelines*, noting the name of the insurance company and the comprehensive dates for which the insurance coverage is valid. The insured should read and thoroughly understand insurance policies of this type, especially regarding any exclusions that may exist (e.g., most insurance policies will not cover death or injury occurring in a privately-owned aircraft).
- Have a medical examination and submit to the district GCE chair the official **Medical Certificate** (included in the *Group Cultural*

Exchange Guidelines completed and signed by the examining physician(s).

- Actively participate in a language and cultural training program if language differences exist between the paired districts.
- Participate in 12 hours of orientation or a regional GCE orientation seminar if offered in my area.

During exchange

- Accept the decisions of the team leader at all times.
- **Remain with the group throughout the cultural program**, except during those periods when individual activities are specifically provided, unless excused by the team leader. Inform the team leader of my whereabouts at all times.
- Maintain standards of behavior and deportment during my travels with the study team that will reflect credit on Rotary, my district, and my country.
- Refrain from engaging in dangerous activities.
- Refrain from engaging in any type of medical practice or activity including but not limited to routine medical procedures, surgical procedures, dental practice, contact with infectious diseases. Educational program participants who engage in this type of prohibited activity are reminded that they are solely responsible for any and all liability that may arise from their participation in this activity, including providing for adequate insurance.
- Have sufficient funds to meet my personal and incidental expenses while abroad.

Post-exchange

- Participate in a post-exchange debriefing.
- Within two months of my return home, submit a GCE Final Report (included in the *Group Cultural Exchange Guidelines* of my study tour experiences and a copy of the GCE Evaluation Form to the GCE chair.
- Consider Rotary or Rotaract membership, if invited.
- Take every opportunity after my return home to share what I have learned through informal contacts and by addressing Rotary clubs and other appropriate organizations.
- Attend at least one Rotary club meeting with my employer to hear my team's post-GCE presentation. This will allow my employer to understand the significance of the exchange experience.

I hereby release and discharge Rotary International and The Rotary Foundation of Rotary International and Rotary Intl District 5960 and their respective successors, officers, directors, agents, and employees from any and all claims, damages, liabilities, or expenses which I or my successors, dependents, beneficiaries, heirs, executors, administrators, or assigns may or hereafter have against any or all of such parties on account of or in connection with The Rotary Intl District 5960 Cultural Exchange or my participation therein. I agree that I shall indemnify and hold harmless Rotary International and The Rotary Foundation of Rotary International, Rotary Intl District 5960 and their respective successors, officers, directors, agents, and employees against any and all claims, damages, liabilities, or expenses which any such party may incur on account of or in connection with my participation in The Rotary Foundation Group Cultural Exchange. The foregoing release and indemnity shall continue to apply to each officer, director, agent, or employee even though such individuals may cease to serve in such capacities and shall inure to the benefit of the legal representatives, successors, and assigns of such individuals. The foregoing release and indemnity shall not apply to the cost of my transportation to and from the receiving district. I agree that I will abide by all District 5960 decisions related to travel safety. If the District 5960 determines, in its sole discretion, at any point in the Group Cultural Exchange (GCE) process that my safety as a GCE participant in the host country is or could

be at risk, the Rotary Intl District 5960 may require that the GCE itinerary be modified, cancelled, or indefinitely postponed. If already in the host country, my GCE team may be asked to return home immediately. In such instances, I agree to abide by the Rotary Intl District 5960's decision as to what, if any, alternatives are available to GCE teams whose trips have been modified, cancelled, or postponed due to safety concerns.

I freely accept the conditions outlined above, understanding that:

- The GCE subcommittee or selection committee has the final authority to select team members. Team members or alternates may be disqualified at any time, if deemed appropriate.
- I Understand that I am responsible to provide only for my transportation between the point of departure in the home district and the point of arrival in the host district. Purchase airline tickets and travel with Team (arrive together as a team.) Provide for my own incidental expenses. Pay for gifts for host families. Understand that lodging, home meals and local transportation will be provided by hosts when available.
- Should I be required to return home prematurely due to travel safety concerns, and I choose to stay, I accept all responsibility for my safe return home.
- I am in good health and able to walk two miles
- Possess valid passport (up to six months post trip date.)
- Submit a \$75 per person deposit check with application. **Non-refundable** is accepted as team member or alternate.
- To promote understanding and goodwill, when appearing in my own country as a member of a Rotary International District 5960 GCE team, I will recognize the right of each person to his/her own opinions and will therefore be cautious about expressing my own personal opinions concerning any controversial, political, racial, or religious issue.
- The Rotary International District 5960 will share my name and contact details with other GCE teams and Foundation alumni groups upon request. Unless I indicate otherwise in writing, by submission of the photos in connection with my final report, I hereby give publication rights to Rotary Intl District 5960, RI and TRF for promotional purposes to further the Object of Rotary, including but not limited to RI and TRF publications, advertisements, and websites. I also authorize RI and TRF to share photos from my final report with Rotary entities for promotional purposes to further the Object of Rotary. I do not authorize RI, TRF, or any other entity to use these photos for any commercial purpose.

NAME (PLEASE PRINT)

SIGNATURE (MANDATORY)

DATE

TEAM MEMBER'S ESSAY OF INTENT

A unique feature of the GCE program is to provide outstanding business and professional people opportunities for studying their profession in another country. Please tell us what you hope to gain professionally or personally by participation in the program and how you intend to use the GCE experience. to. **Please attach your response on an additional page.**

VOCATIONAL CLASSIFICATIONS

Please check only one vocational classification from those listed below that is closest to your current or retired profession.

Management/Administration

- Executive
- Director
- Manager
- Supervisor
- Office Manager
- Coordinator
- Customer Service Representative
- Administrative Assistant
- Administrator
- Adviser
- Trainer
- Minister/Priest

Education

- University Professor
- Lecturer
- Secondary Teacher
- Elementary Teacher
- Kindergarten Teacher
- Au Pair/Nanny
- Counselor
- Language Instructor
- Administrator
- Researcher

Public Service

- Police Officer
- Probation Officer
- Firefighter
- Postal Worker
- Public Information Officer
- Social Worker
- Crime Victims Advocate
- Military
- Government

Engineering/Science

- Construction Engineer
- Civil Engineer
- Electrical Engineer
- Mechanical Engineer
- Computer Engineer
- Environmental Engineer
- Architect
- Builder
- Scientist
- Computer Programmer
- Software Developer
- Pilot
- Navigator

Legal

- Attorney
- Judge
- Clerk
- Paralegal

Advertising/Marketing/

Public Relations/Sales

- Representative
- Administrator
- Graphic Artist
- Product Specialist
- Salesperson
- Flight Attendant

Finance

- Banker/Bank Teller
- Analyst
- Auditor
- Cashier

Self-Employed

- Consultant
- Owner/Proprietor
- Farmer

Media/The Arts

- Journalist
- Editor
- Publisher
- Media Announcer
- Media Reporter
- Musician
- Artist
- Craftsman

Medical/Health

- Physician
- Dentist
- Pharmacist
- Nurse
- Therapist
- Veterinarian
- Hygienist
- Occupational Health & Safety Officer
- Administrator
- Paramedic
- Specialist

Other

TEAM MEMBER APPLICANT'S EDUCATIONAL DATA (ACADEMIC, TECHNICAL, PROFESSIONAL)

1.	NAME AND LOCATION OF INSTITUTION	DATES ATTENDED	DEGREES OBTAINED AND DATES RECEIVED
2.	NAME AND LOCATION OF INSTITUTION	DATES ATTENDED	DEGREES OBTAINED AND DATES RECEIVED
3.	NAME AND LOCATION OF INSTITUTION	DATES ATTENDED	DEGREES OBTAINED AND DATES RECEIVED

Languages: List languages (other than your own) in which you are proficient in reading, writing, and speaking:

Indicate special recognition you have received, including scholarships, honors, awards, and prizes. **List, but do not attach, articles, pamphlets, or books that you have published.**

List educational, fraternal, civic, professional, and other organizations of which you are, or have been, a member. Indicate offices held, if any:

USE ADDITIONAL SHEETS IF NECESSARY

ROTARY CLUB ENDORSEMENT

After consideration of _____ applicants, **the Rotary Club of _____**
MANDATORY

proposes _____ for membership on the district Group Cultural Exchange team and forwards his/her application for consideration by the district Group Cultural Exchange subcommittee.

NAME OF CURRENT CLUB PRESIDENT (PLEASE PRINT)

SIGNATURE OF CLUB PRESIDENT (MANDATORY)

DATE

DISTRICT ENDORSEMENT

District # _____

_____ has been selected to be a member of our district's Group Cultural Exchange team. The Group Cultural Exchange selection committee was composed according to District 5960 Guidelines.

NAME OF CURRENT DISTRICT GOVERNOR (PLEASE PRINT)

SIGNATURE OF DISTRICT 5960 ROTARY GOVERNOR (MANDATORY)

DATE

NAME OF CURRENT DISTRICT GCE LEAD (PLEASE PRINT)

SIGNATURE OF DISTRICT GCE LEAD

DATE

Once the team is selected, the district GCE TEAM LEAD should submit the completed application along with all team member applications and insurance and medical certificates to the GCE coordinator via e-mail or fax at 651/636-8799.