

# FOREIGN EXCHANGE PROGRAM

2023-2024

## Northwest ISD Petition for Participation

(Please Print or Type)

Organization \_\_\_\_\_

Address \_\_\_\_\_

Program Representative \_\_\_\_\_

Address \_\_\_\_\_

Phone-Work \_\_\_\_\_ Home \_\_\_\_\_

Email \_\_\_\_\_

Community Coordinator \_\_\_\_\_

Phone-Work \_\_\_\_\_ Home \_\_\_\_\_

Email \_\_\_\_\_

Area Coordinator \_\_\_\_\_

Phone-Work \_\_\_\_\_ Home \_\_\_\_\_

Email \_\_\_\_\_

Year Organization was established \_\_\_\_\_

Please circle the appropriate answer to the questions below:

- |  |      |          |
|--|------|----------|
| 1. Current Information Brochures submitted | Y    | N        |
| 2. DOS designee                            | Y    | N        |
| 3. Private, Not-for-profit organization    | Y    | N        |
| 4. English language support provided       | Y    | N        |
| 5. Placed students in NISD previously      | Y    | N        |
| 6 Academic Program duration                | Year | Semester |

Briefly describe the organization's process for student selection, including who conducts the screening.

---

---

---

---

---

---

---

---

Briefly describe the organization's process for host family selection, including who conducts the screening.

---

---

---

---

---

---

Describe/Submit the organization's termination policy.

---

---

---

---

---

---

LOCAL REFERENCES (Former Host Families)  
(List all for the past 3 years)

Name	Address	Telephone
------	---------	-----------


SCHOOL REFERENCES

(List all Schools where students were placed in the last 3 years)

Name	Address	Contact Person	Telephone
------	---------	----------------	-----------

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____