

Marlboro Youth Exchange Program Chaperone Application

Select ONE:

- Nanto, Japan
- Wujiang, China

Please take the following into consideration before applying:

- Exchange countries may have climate considerations i.e. extreme heat
- Many of the activities are physically demanding in the heat
- Chaperones will be expected to host the Farewell Dinner in the exchange country
- Chaperones are expected to coordinate with the Marlboro Student Ambassadors to provide individual and group performances for the Farewell Dinner
- Chaperones must be available to attend pre-trip programs with the Marlboro Student Ambassadors
- Expect to home stay with a hosting family

PRINT IN DARK INK OR TYPE

FULL LEGAL NAME: _____

(First) (Middle) (Last)
** Full given name as it appears on the passport is required by airlines **

Gender: _____ Age: _____ Birth Date: _____ T-shirt Size: _____
(M/D/Y)

CONTACT INFORMATION:

Home Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ cell: () _____

E-mail: _____

Work Address: _____ Occupation: _____

City: _____ State: _____ Zip: _____

Work Phone: () _____

Spouse's Name: _____ Work or Cell # _____
(for emergency use)

Name & Age of Children: _____

Emergency Contact Name: (other than spouse) _____

Relationship: _____ Phone: () _____

TRAVEL:

1. Have you flown domestically before? Yes No Internationally? Yes No

2. Do you have a current passport? Yes No Expiration Date: _____
Passport Number: _____

Have you chaperoned a group of youth before? Yes No
If yes, please list 2 most recent times:

_____	_____	_____
Event/Group	Approximate # of Youth	Month/Year
_____	_____	_____
Event/Group	Approximate # of Youth	Month/Year

Have you applied for this position in the past? Yes No If so, what year(s) _____

Have you had a background check? (If selected as a chaperone, you will need to provide us with necessary information to perform a background check) Yes No

Do you speak a foreign language? If so, please list languages spoken with level of competency: (fluent or understand & speak basic social language)

Languages	Competency

Briefly describe your involvement with children/teens through teaching, extracurricular activities such as coaching, scouts, etc.

Briefly describe your involvement to date with the Marlboro Youth Exchange Program:

Briefly describe your experience with International travel:

Do you work for or contribute to the Marlboro Township community and in what capacity?

Please add any other comments you would like to include that would support your application:

REFERENCES:

Please list 2 references:

Name	Address	Telephone

I, the undersigned, agree to indemnify and hold harmless the Township of Marlboro and its officers, agents and employees from any and all costs, claims and liability arising out of my participation in this event. I do hereby waive any and all rights of claim damages or losses resulting from my participation in the Marlboro Youth Exchange Program and hereby assume liability for any loss, damage or other liability from such event.

PRINT Name of Applicant

X _____
Applicant's Signature

Date

NOTARIZED SIGNATURE FORM

STATE OF NEW JERSEY

COUNTY OF MONMOUTH

I, _____, being duly sworn, depose and say I am the above named person. I signed the foregoing statement. I personally read and printed by hand, answers to each and every question therein and I do solemnly swear that each and every answer is full, true and correct in every respect.

“Under Penalty of Law”, a person who makes a false statement under oath or equivalent affirmation, or swears or affirms the truth of such a statement previously made, when he does not believe the statement to be true, is guilty of a crime of the fourth degree in violation of 2C:28-2.

Signature of Applicant

Sworn before me this _____ day of _____ 20 _____

Notary Public or Commissioner of Deeds

**RELEASE
AUTHORIZATION**

To all Courts, Probation Departments, Selective Service Boards, Physicians, Hospitals, Employers, Credit Reporting Agencies, Educational and other Institutions and Agencies without exception.

I, _____, am making an application to be considered for a chaperone as part of the Marlboro Youth Exchange Program. As a result, an investigation is being conducted to determine my eligibility.

I respectfully request and authorize you to release to the Township of Marlboro or its representatives, any and all information, photos, videos, documentary or otherwise that they may ask for concerning me.

I hereby release, discharge, and exonerate the Township of Marlboro, its agents or representatives, and any person so furnishing information, from any liability of every nature and kind arising out of the furnishing, inspections, or collection of such documents, records, and other information for the investigation made by the Township of Marlboro.

A copy or facsimile of this authorization will be considered as effective and valid as the original. The original of this form is maintained at the Township of Marlboro and will be made available upon demand. This authorization, or a reproduction thereof, shall be valid for a period of one year from the date of execution of this document.

Signature of Applicant

Date

Sworn before me this ____ day of _____ 20 ____

Notary Public or Commissioner of Deeds