



CONGRESS-BUNDESTAG YOUTH EXCHANGE

2020-21 VOCATIONAL SCHOLARSHIP PROGRAM

STUDENT APPLICATION

PLEASE NOTE: Responses entered into this online form will NOT be saved. To save responses, first save this PDF form to your computer. Then, enter responses, re-save and/or print the PDF, and submit via email.

****Please refer to the Student Application Instruction Page for specific information about submitting your complete application to CBYX@nacelopendoor.org by January 15, 2020.****

VOCATIONAL PROGRAM REQUIREMENTS:

1. Senior class standing upon nomination (12th Grade)
2. Student 18 or 19 years of age by July 1 of program year (some flexibility allowed)
3. Cumulative grade point average of 3.0 or above on a 4.0 scale
4. U.S. Citizen
5. A limit of three students may be nominated per school

Name of Student: _____
Last First (Legal) Middle Initial

Home Address: _____
Street Address City State Zip

Student E-mail: _____ Skype Address: _____

Home Telephone: _____ Student Cell Phone: _____

Birth Date: _____ Gender: Male Female Other
Month/Day/Year

Media (optional): Homepage/Website/Blog: _____ Facebook Username: _____

Twitter Handle: _____ Instagram Handle: _____ Whats App: _____

LinkedIn Username: _____ SnapChat Username: _____

Mr. Ms. Mrs. Mr. & Mrs. _____
Name(s) of Parent(s) or Legal Guardian

Are you a United States citizen? Yes No

Do you have any citizenship other than U.S.? Yes No If yes, list country: _____

Name of Nominator: _____ Position or Title: _____

School Name: _____

School Address: _____
Street Address or P.O. Box City State Zip

School Office Telephone: _____ Nominator's E-mail: _____

What is your Congressional district number and the name of your U.S. Representative to Congress?

— Congressional District Number 1 Name of U.S. Representative

PART I: HIGH SCHOOL ACTIVITIES, AWARDS, & INTERESTS

In the space allotted below, list your activities and achievements. Also, please specify how many hours per month you spend doing these activities. Limit your answer to only those activities from your high school years.

ACTIVITIES

HOURS PER MONTH

Activities and organizations in which you have been a frequent participant. Specify any offices held.

Athletic teams you were or are a member of and number of years of participation.

Community activities in which you have been involved, such as scouts, volunteer work, religious youth groups, peer tutoring, etc.

Creative work, hobbies or special training, such as music, dance, drama or foreign language, which you have pursued to the point of some mastery.

Paid work or jobs you have held. Specify the type of work you did and the length of time employed.

Prizes, honors, offices or special recognition you have received, such as National Honor Society, foreign language, creative writing, science, music, team captain, etc.

Travel, domestic and international.

PART III: EXCHANGE PROGRAMS

How did you first learn about CBYX?

- | | |
|---|---|
| Brochure | Internet Search or Advertisement |
| Club/ Youth Organization (4-H, Boys and Girls Clubs, Church Groups, Scouts, etc.) | Media: Magazine, Newspaper, Radio, TV |
| Counselor (at school or elsewhere) | Poster |
| Email | Social Media: Advertisement, Post from a friend |
| Exchange Organizations | State Department Presentation |
| Exchange Student or Program Alumnus | STARTALK |
| Family Member | Teacher |
| Festival | Other (please specify) _____ |
| Honor Societies | |
| Host Family | |

Eligible students may apply for more than one Department of State youth exchange program. Please check all other programs for which you may be applying:

- | | | | |
|---------------|------------------|--------------------------|-------------------|
| None | CBYX High School | CBYX Young Professionals | |
| NSLI-Y Summer | NSLI-Y Year | YES Abroad | Youth Ambassadors |

Does your parent work for the U.S. Department of State: Yes No

Does your parent work for AFS, American Councils, ASSE, CIEE, Cultural Vistas, Nacel Open Door, or YFU?

Yes No

If you have already participated in one of the following Department of State youth exchange programs, please check the program and include the date of participation:

- | | |
|---|-------------|
| American Youth Leadership Program (AYLP) | Date: _____ |
| Congress-Bundestag Youth Exchange (CBYX) | Date: _____ |
| Kennedy-Lugar Youth Exchange and Study Abroad (YES Abroad) | Date: _____ |
| National Security Language Initiative for Youth (NSLI-Y) | Date: _____ |
| Youth Leadership Program (participants who travelled overseas only) | Date: _____ |
| Youth Ambassadors Program | Date: _____ |

PART IV: PERSONAL ESSAYS

This is a two-part writing assignment. Please complete both essays. These essays are a substantial part of your application and will be reviewed carefully by the Selection Committee. Please create a separate, typed document for EACH essay, include your name on each, and submit them with the rest of your application.

Essay A: Type a letter to your host family in which you describe yourself, your family, your activities and interests, your community, and your goals for the future. Think of the letter in terms of the first impression your German host family would have of you.

Essay B: Type a response to the following: In what ways is your family important to you? What do you see as special about your family? Describe your relationship with each family member.

PART V: DEMOGRAPHIC INFORMATION

Please complete the demographic information questions, which are found on page 6 of this application. This information is for statistical use only. The demographic information is not used for scholarship selection, but is requested by the U.S. Department of State for the purpose of understanding the background and circumstances of the students who apply for their scholarship programs.

CONFIRMATION & SIGNATURES

Please note that, should you be selected as a finalist, confirmation of the scholarship is contingent upon fulfillment of the medical, placement, academic, and other requirements of Nacel Open Door. The Congress-Bundestag scholarship does not include domestic airfare within the U.S., nor does it include spending money, passport, or residence permit expenses for students during their exchange year.

I hereby certify that the information contained in this application is truthful, and that I have read the preceding statement and understand that acceptance to the program is not final until these requirements have been fulfilled.

I agree that the below checkbox, as well as my name and the date, will constitute an electronic signature on this CBYX Vocational Scholarship Application. I further agree that this electronic signature is the legally binding equivalent to my handwritten signature.

Signature of Student

Date

Signature of Parent

Date



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Bureau of Educational and Cultural Affairs



PART V: DEMOGRAPHIC INFORMATION

The following questions are optional and will be used for statistical purposes only. This information is not used for scholarship selection.

1. Please indicate any background with which you identify.

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or other Pacific Islander
- White

2. Do you identify as having a disability? Yes No

If yes, please indicate:

- Hearing
- Medical
- Mobility
- Speech
- Visual

Other If other, please describe: _____

3. What is your household income?

- Under \$45,000
- \$45,000-\$89,999
- \$90,000-\$149,999
- \$150,000-\$250,000
- Over \$250,000

4. In what type of community do you live?

- Suburban
- Urban
- Rural

Other If other, please specify: _____

5. What type of school do you attend?

- Public
- Private
- Homeschool

Other If other, please specify: _____

Thank you for providing this information.