

AMERICAN FEDERATION EDUCATION AND CULTURAL EXCHANGE MISSION

AMERICAN FEDERATION RAMALLAH PALESTINE

APPLICATION

A. SHORT ANSWER COMPONENT

Name of applicant _____

Address _____

City _____ State _____ Zip _____

Email address _____

Cell phone # (____) _____ Alternate phone # (____) _____

Date of birth: (mo/day/yr) _____ Place of birth _____

Nationality _____ Language(s) _____

Occupation _____ Employer _____

Highest level of education _____ School _____

Check the option that applies: Single Married Divorced Widowed

Do you have children? If so, list their names and ages: _____

Please provide a list of organizations you are involved with and the number of years you have been involved with them.

On a scale of 1-5, how up-to-date are you on current events, particularly in the Middle East?

1 2 3 4 5

Please provide a list of your main sources of information (2 or 3) _____

Have you ever travelled outside of the United States? If so, where and when? _____

How did you hear about AFECM's program? _____

I am available for travel during the program dates of:

October 6-14, 2019 _____

Alternative Month _____

B. ESSAY COMPONENT

In 250 words or less, describe why you are the ideal candidate for AFECM's cultural exchange program. Include, if selected as a delegate, what would you propose to do to promote the program and share your experience with your community and organizations of interest. Please attach this essay separately.

C. RECOMMENDATION COMPONENT

Please provide AFECM with two recommendation letters:

- A. The first recommendation letter should be professional in nature: from your supervisor or professional mentor who can vouch for your integrity and leadership skills in the workplace.
- B. The second recommendation letter must be a character reference from a peer, colleague, or close friend (no family members, please), who can describe your personality and relational skills.

These recommendation letters can be send via email to sofia.farah@afrc.org and must include the recommender's email address, home address, and phone number.

D. PLEASE ATTACH A CURRICULUM VITAE TO YOUR APPLICATION.

Agreement and Waiver

I certify that the information on this application is correct. I understand that on becoming a participant in this program, I shall be subject to all rules, regulations and requirements as to conduct, and the national and local ordinances of the country in which I will be visiting. My signature on this application form indicates my understanding and acceptance of the above statements and the following waiver.

AFECM and its affiliated institutions, in making arrangements for the programs, act only as agents. Neither AFECM, program organizers nor any other persons, parties, organizations or agencies collaborating with them is or shall be responsible or liable for injury, loss, damage, deviation, delay or curtailment, however caused, or the consequences thereof which may occur during any of the travel or programs.

Please be aware that there is always a **risk** when traveling to occupied Palestine. For more information about the risks involved by travelling to occupied Palestine, please visit the US Department of State's website:

<https://travel.state.gov/content/passports/en/alertswarnings/israel-travel-warning.html>

Signature _____ Date _____

Please send scanned application, essay, and curriculum vitae to:

Sofia Farah
sofia.farah@afrc.org