

# APPLICATION For BURBANK-OTA SISTER CITY 2009 STUDENT EXCHANGE PROGRAM

The cities of Ota, Japan and Burbank, California have successfully participated in a 2-week summer cultural student exchange program since 1984. Burbank students travel to Ota and stay with a Japanese family one year and Ota students travel to Burbank the next. Summer 2009 marks the 13<sup>th</sup> group of Burbank students to visit Ota. The program's purpose is to promote communication, goodwill, and cultural awareness, as well as foster closer relationships as sister cities by offering the opportunity of better understanding between the Japanese and American people.

**Applicants must be Burbank residents and a high school student (grades 9-12).**

It is an honor to be selected as an exchange student to Ota, Japan. The Committee will select 12 student representatives and two alternates. Being selected entails a great deal of responsibility since you will be representing both the City of Burbank as well as the Sister City Committee. Successful applicants and their parents must comply with obligations as follows:

- join the Burbank Sister City Committee (application attached);
- commit to a minimum 2-year period in an active role on the Sister City Committee, including preparation for and participation during summer visitation of Ota students to Burbank;
- participate in BSCC fundraising activities;
- attend monthly meetings, student Orientation and other planning meetings in preparation for the trip;
- host a Japanese student in your home *or* provide an alternate Burbank host family acceptable to the Committee;
- promote the sister city program;
- obtain and submit student passport and 3 extra passport photos by the deadline date established by the committee;
- submit all funds required for airline ticket purchase by the required deadline;
- be Livescan fingerprinted as required by City of Burbank policy.

The full cost of the trip to Ota, Japan is the family's responsibility. ***Financial aid, determined by separate application (attached), is available for qualified students.*** The approximate cost of the trip includes, but is not limited to:

- Airfare - \$1400
- Passport - \$120
- Gifts for families in Ota - \$150
- Spending money in Ota - \$300 (average)

Participation in fundraising efforts can result in substantial cost reduction.

You will be advised of important informational meetings and timelines for monies and passports. *Once selections are made, it is expected that commitments for travel to Japan will be kept.*

Completed applications **must** be submitted by or before 5:00 p.m., **Friday, October 31, 2008**, at the Burbank Central Library, 110 N. Glenoaks Blvd., Burbank, attn: Sharon Cohen. Applications received after the deadline will not be considered.

**KEEP THIS PAGE AND MAKE A COPY OF YOUR COMPLETED APPLICATION FOR YOUR RECORDS.**

**BURBANK SISTER CITY STUDENT EXCHANGE PROGRAM  
STUDENT APPLICATION – SUMMER 2009**

*PLEASE PRINT OR WRITE CLEARLY*

Applicant Name \_\_\_\_\_  
Last First M / I

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Month/date/year of birth \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Home phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ e-mail \_\_\_\_\_

U.S.Citizen Yes \_\_\_ No \_\_\_ If No, Alien Registration Number \_\_\_\_\_

If not a U.S. Citizen, will you need a Japanese visa? \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Work phone ( ) \_\_\_\_\_ work phone ( ) \_\_\_\_\_

Cell phone ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

Email \_\_\_\_\_ Email \_\_\_\_\_

1) Please write a short paragraph on why you want to participate in the Burbank Sister City Student Exchange Program.

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2) What do you feel you can contribute to foster closer relationships between the people of Burbank and the people of Ota?

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3) Are there any foods you will not eat? Yes\_\_\_ No\_\_\_ If yes, what foods?

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4) List all clubs and activities, including dates of participation, in which you are involved. Include school, church, and community activities. Use additional pages if necessary.

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5) Why do you feel any of the above activities would contribute to you representing Burbank in the student exchange program?

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6) Do you have previous experience with Japanese people or Japanese culture?

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7) Have you visited a foreign country before? Yes\_\_\_ No\_\_\_ If yes, which country(ies)?

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8) Would you feel comfortable living with a family who may speak only Japanese? Yes\_\_\_ No\_\_\_

9) Name some ways you would try to communicate. \_\_\_\_\_

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10) Do you have any medical problems that would interfere with or prohibit full participation in the trip? Yes\_\_\_ No\_\_\_ If yes, please explain \_\_\_\_\_

11) Do you have pet, food, or other allergies? Yes\_\_\_ No\_\_\_ If yes, please list. \_\_\_\_\_

12) Is there anything additional you would like to tell us about yourself? \_\_\_\_\_

In addition, upon acceptance as a 2009 exchange student to Ota, the City of Burbank requires that all household members age 18 and over, who will host an inbound Japanese student in the summer of 2008, be fingerprinted by *Livescan Fingerprinting Services* through the City of Burbank.

***This application must include the following:***

- *two letters of recommendation from teachers, administrators or a school counselor;*
- *a copy of each of your last two **semester** grade reports.*

**Incomplete applications will NOT be considered.**

The selection committee will review all applications. Applicants who pass the paper screening will have individual interviews to determine final selection. Interviews will be conducted in November 2008. Written notification of interview date and time will be provided. Parents will have a separate informational interview, simultaneous to the student interview. Applicants will be notified in writing within 10 days following the interviews. Verified falsification or mis-information by the applicant will result in immediate removal from the exchange program.

**CERTIFICATION**

In submitting this application, I/we certify that the information provided is complete and accurate to the best of our knowledge. We also understand the obligations outlined on the front page of this application packet and will comply with the best of our ability.

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Print name – student applicant	Signature – student applicant	Date
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Print name – applicant parent	Signature of parent	Date
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Print name – applicant parent	Signature of parent	Date
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Applications must be returned by 5:00 p.m., **Friday, October 31, 2008** to the following location:

- Burbank Central Library (Circulation Desk), 110 N. Glenoaks, Burbank, CA 91502  
(Attention: Sharon Cohen, Library Services Director)

# BURBANK SISTER CITY STUDENT EXCHANGE PROGRAM STUDENT SCHOLARSHIP APPLICATION – SUMMER 2009

PLEASE PRINT OR WRITE CLEARLY

Fill out only if applying for scholarship:

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_  
Last
First
M / I

City \_\_\_\_\_ Zipcode \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_ Current Grade \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Father's Name \_\_\_\_\_ Father's Work Phone ( ) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Mother's Work Phone ( ) \_\_\_\_\_

The Burbank Sister City Student Exchange Program provides a limited number of scholarships to assist with travel to Ota, Japan. It is a need-based grant, with the following criteria:

- Student must be a Burbank resident;
- Two most recent *semester* grade reports must reflect at least average class grades, satisfactory attendance and good citizenship;
- *Student Application* and *Student Scholarship Application* are completed and submitted;
- Total household income is not more than allowable income listed below; and
- Explanation of any unusual financial circumstances is submitted.

Financial need is based on total annual household income below the following Community Development Block Grant (CDBG) income limits (80% of median). To verify need, please submit one of the following:

1. Parents' last year's completed federal tax return or past 3 months pay stubs;
2. TANF or Welfare Eligibility Statement;
3. Proof of eligibility for Reduced or Free Lunch Program.

<b>Circle Number of Persons in Household</b>	<b>Total Annual Household Income</b>	<b>CDBG maximum Allowable income</b>
1	_____	\$38,000
2	_____	\$44,350
3	_____	\$49,900
4	_____	\$55,450
5	_____	\$59,900
6	_____	\$64,300
7	_____	\$68,750

Student Applicant: On a separate page, please express in 150 to 200 words what the opportunity of being selected as a participant in and scholarship recipient of the Burbank Sister City Student Exchange Program would mean to you.

Complete and submit this page, financial eligibility information, explanation of any unusual financial circumstances that should be considered and your short essay, along with your Student Application by the required date and to the location stated on the Student Application form. No scholarship monies will change hands. Money will be applied toward purchase of airline tickets only.

# Burbank Sister City Committee

## *Membership Application*

Dear Burbank Sister City Committee Prospective Members,

The Burbank Sister City Committee is pleased to welcome you as a member. We look forward to your participation with the committee.

Please return this form to the address shown at the bottom of the page, along with a check for your membership dues. Dues are collection on an annual basis (Jan-Dec). Your contribution will be used to support committee activities.

Thank you for your support of the Burbank Sister City Committee.

(Please Print)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email address: \_\_\_\_\_

- I would like be added to the Burbank Sister City Committee membership list. Enclosed is a check for my annual membership dues.

*Please feel free to include a donation in addition to your annual dues payment.  
Any amount is greatly appreciated!*

- Family membership\* - \$20     Individual membership - \$10     Donation - \$ \_\_\_\_\_

\*Write additional names and email addresses on back of sheet

Total amount enclosed: \$ \_\_\_\_\_

**Please make checks payable to “Burbank Sister City Committee”**

- Please send monthly meeting minutes and other correspondence to keep me informed of Committee activities via E-mail.

**PLEASE COMPLETE AND RETURN THIS FORM TO:**

***Burbank Sister City Committee***

***c/o Burbank Central Library  
110 N. Glenoaks Blvd.  
Burbank, CA 91502***