

ILLAWARRA YOUTH EXCHANGE PROGRAM APPLICATION FORM

Applications close end of February yearly.

Application for:

KIAMA NSW 2533

USA or U.K. or both (circle)

Name:		Age:
	Postcode:	
Parent or Guard	dian (if under 21 years of age:	
Address (if diff	ferent):	
Farm Name:		
	ory (High School level, Uni, Further Ed	
In your own wo may be added).	•	ry in response to the following questions: (Additional pages
1. Summarise	your extra-curricular activities (school	, church, community, etc).
•	ur association and involvement with the rith your own herd.	Australian Illawarra Cattle Society or how you have been
3. Explain ho	w you have benefited from your experie	ences with Illawarras.
4. Explain why you would like to travel as an exchange student and what you feel you could learn from this experience.		
5. What are yo	our plans for your future?	
6. What do yo	ou feel is the future of the dairy industry	?
Signature of Applicant		Date
Signature of Pa	arent or Guardian (if under 21 years of a	ge)
Return to:	ICSA Youth Exchange	