**CANDIDATE’S APPLICATION FORM**

**PROJECT TITLE：□ 2024 Taiwan Service Tour**

**Instructions**

The candidate should complete this form.Each question must be answered clearly and completely. Detailed answers are required in order to make the most appropriate arrangements. If necessary, additional pages of the same size may be attached.

**1. PERSONAL DATA**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| a.NAME | Family name（Last name）  Given Name Middle Name  （First Name） | | | | | | | | | | | Attach Recent Photograph Here | | | |
| b. HOME ADDRESS:  Telephone(H)： Cell Phone:  Email： Skype: | | | | | | | | | | | |
| c. NATIONALITY |  | | | | | | | | | | | | | | |
| d. GENDER | ↻Male　　　↻Female | | | | e. Year in School: | | | | | | | | | | |
| f. DATE OF BIRTH | (Month／Day／Year): | | | | | | | | | AGE： | | | | | |
| g. RELIGION |  | | | | | | | | | | | | | | |
| h. HEALTH HISTORY |  | | | | | | | | | | | | | | |
| i. CHRONIC DISEASES | ↻No ↻Yes If yes, Please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
| j. DIETARY RESTRICTIONS | ↻No ↻Yes If yes, Please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | |
| k. SECOND LANGUAGE PROFICIENCY | LISTEN | | | READ | | | | WRITE | | | | | SPEAK | | |
| Excellent | Good | Fair | Excellent | | Good | Fair | Excellent | Good | | Fair | | Excellent | Good | Fair |
| (LANGUAGE) |  |  |  |  | |  |  |  |  | |  | |  |  |  |
|  |  |  |  |  | |  |  |  |  | |  | |  |  |  |
| l. CONTACT PERSON, IN CASE OF EMERGENCY | Name： Relationship：  Address：  Telephone: Cell Phone:  Email: | | | | | | | | | | | | | | |

**2. EDUCATION AND TRAINING** Note：Highest level completed.

|  |  |  |  |
| --- | --- | --- | --- |
| School Name | Subject | Qualifications  (Certificate / Diploma / Degree) | Year Obtained |
| 1.  2. |  |  |  |

**3. WORKING EXPERIENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| DESIGNATION： | ORGANIZATION WORKED FOR： | PERIOD OF EMPLOYMENT： | JOB DUTIES： |
| 1.  2. |  |  |  |

**4. RECOMMENDATION OF AUTHORITY**

|  |
| --- |
| Comments on educational qualifications, experience in the training subjects, age, and personality of the candidate:  Responsible official: Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**5. ACTIVITY DESCRIPTION**

*Tell us more about one of your extracurricular or volunteer activities (100-150 words). If you need more space, please attach your response to the end of the application.*

**6. PERSONAL STATEMENT**

*Please write an essay (500 words or fewer) that demonstrates your ability to develop and communicate your thoughts. Some ideas include: a person you admire; a life-changing experience; or your viewpoint on a particular current event. If you need more space, please attach your response to the end of your application.*

**7. REFERENCE**

*Reference: List below three references. Please attach three letters of recommendation.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *Name* | *Position* | *Department / Institution* | *Contact Information* | |
| *Telephone* | *Email* |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**APPLICATION CHECKLIST**

*Application form (no later than March 1st, 2024)*

*Attach three recommendation letters.*

*Attach a letter of authority*

*Please email your application to carrie@tiyea.org*

**DECLARATION BY CANDIDATE**

**1.** I hereby declare that the information as provided by me in this document is true and accurate. I understand and accept that any false declaration of information on my part will disqualify me from the program, even when it is in progress.

**2.** I declare that I am not suffering from any serious or chronic disease and that I am not hindered in the performance of my duties by any illness or disability:

**3.** I hereby undertake to abide by the laws of the Republic of China (ROC) during my stay in Taiwan and undertake to do the following:

Fulfill due performance as required in attendance.

Not seek employment or engage in any political activities.

Bear any additional expenses or risks incurred as a result of any changes initiated by myself.

Not bring with me any family members or friends.

**4.** I fully agree that Taiwan International Youth Exchange Association has the right to terminate my stay if, during my stay in the ROC, my behavior causes any difficulties for the management of the Learning First International or the training institution.

**5.** I understand that during my stay in the ROC, only those matters related to the training program will be settled in accordance with Learning First International’s rules and regulations, and that Taiwan International Youth Exchange Association’s decision will be final and will be implemented accordingly. Cases irrelevant to the training program shall be otherwise of my own responsibilities and at my own cost.

**Applicant’s signature： Date：**