

YOUTH AMBASSADOR EXCHANGE PROGRAM

Applicant's name (Last, First) _____,

APPLICATION SIGNATURE PAGE

This is the signature page for the Program Application you are submitting

APPLICANT

I hereby apply for the position of Youth Ambassador in the Phoenix Sister Cities Youth Ambassador Exchange Program. To that end, I have provided the within answers and information, which, upon penalty of perjury, I certify are true and correct to the best of my knowledge and belief.

I understand that if I am chosen, I will be required to enter into the Phoenix Sister Cities' Youth Ambassador Agreement and its related agreements.

I further certify that:

- I have read the Phoenix Sister Cities Youth Ambassador Program Guidelines;
- **I consent to travel to any of Phoenix's Sister Cities, including cities in areas which may be subject to a United States Department of State travel alerts and warnings; and I have read the most recent such alerts and warnings respecting travel to Phoenix's Sister Cities, if any, and I have obtained such other outside advice and counsel on the subject as I feel necessary to make a decision respecting travel to such area(s).**
(See the information page to this application for information on accessing Department of State postings.)

Party	Signature	Date
Applicant		

APPLICANT'S PARENTS/LEGAL GUARDIANS (Must be signed by all custodial parents and guardians of Applicant)

The person signed above is my/our child/ward ("Applicant"). Applicant has my(our) permission to apply to, and participate in, the Phoenix Sister Cities Youth Ambassador Exchange Program. Upon penalty of perjury, I/we certify that the answers and information provided in this application are true and correct to the best of my/our knowledge and belief.

I/We understand that if Applicant is chosen, I/we will be required to enter into a contractual guaranty of the Phoenix Sister Cities' Youth Ambassador Agreement and into related Parent Agreements.

I/We further certify that:

- I/We have read the Phoenix Sister Cities Youth Ambassador Program Guidelines;
- **I/We consent to Applicant's travel to any of Phoenix's Sister Cities, including cities in areas which may be subject to a United States Department of State travel alerts and warnings; and I/we have read the most recent alerts and warnings respecting travel to Phoenix's Sister Cities, if any, and I have obtained such other outside advice and counsel on the subject as I feel necessary to make a decision respecting travel by Applicant to such area(s).**
(See the information page to this application for information on accessing Department of State postings.)

(If only one parent's or guardian's signature is provided) I represent and warrant that I am not married, and that I am the sole parent or guardian of Applicant. This representation and warranty will survive the termination of this process.

Party	Signature(s)	Date
Parent 1/Guardian		
Parent 2/Guardian		

FAMILY INFORMATION SIGNATURE PAGE

This is the signature page for the Family Information for Hosting page you are submitting

NOTICE

Applicants and their families are advised that to determine the household's ability to fulfill its role as a host family, all adult residents of the home will be required to provide necessary information for, and submit to, the running of a criminal background check on themselves. Persons aged 18 or older will be deemed adults for this purpose. Existence of a felony conviction by any adult in the household at any time in the past will be grounds for exclusion of that household to serve as a host family in the program, but will not necessarily preclude an applicant from selection as a Youth Ambassador. Results of the background checks will be treated confidentially. By submitting this application and signing this signature page, you consent to this background check.

HOST FAMILIES	REQUIRED SIGNATURE
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In order to affirm our ability to fulfill our role as a host family in the Phoenix Sister Cities Youth Ambassador Exchange Program, I/we have provided the within answers and information, which, upon penalty of perjury, I(we) certify are true and correct to the best of my/our knowledge and belief. I/We further certify that I/we have read the Phoenix Sister Cities Youth Ambassador Program Guidelines. I/We understand that if chosen, I/we will be required to enter into the Phoenix Sister Cities' Host Agreement and its related Agreements. I/We agree to a home inspection and to the conducting of a criminal background check on each of us, and will cooperate in providing all necessary information for that.

(If only one signature is provided) I represent and warrant that I am not married. This representation and warranty will survive the termination of this process.

Party	Signature(s)	Date
Parent 1/Guardian		
Parent 2/Guardian		

REQUIRED SIGNATURES OF OTHER RESIDENTS IN THE HOME	(Must be signed by ALL other home residents age 18 or older)
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Each of the undersigned agrees to the conducting of a criminal background check on him/herself, and to cooperate in providing all necessary information for that background check.

Relationship	Signature(s)	Date