

SECTION 1

Please complete in ink using capital letters. It is very important that the information written on this page is correctly spelled and accurate. This information will later be transferred to visa documents; therefore, it is important that your name matches the name written in your passport (do not use any nicknames). Please also verify that you have not reversed the day and month of your date of birth.

female male

Last name

First name

PERMANENT ADDRESS

Street:

City:

Postaal Code:

Telephone:

e-mail:

EMERGENCY CONTACT

Name:

Relationship to you:

Telephone:

mobil:

Fax:

e-mail:

SECTION 2

DO YOU HAVE ANY PRACTICAL EXPERIENCE:

yes no

In which field:

How do you rate your knowledge of the following language?

English excellent good average poor

French excellent good average poor

SECTION 7

I certify that I do meet the eligibility criteria listed for SWAP and that I have truthfully completed this application. I understand that my registration fee is non-refundable.

Date/Place:.....Signature :

SECTION 3

Date of Birth

DayMonthYear

Age at time of application

City of Birth:

(muss mit Pass übereinstimmen)

Citizenship:

Status single married divorced

University / Occupation:

Passport No.: Expiry Date:

SECTION 4

How did you first hear about SWAP:

Fair Newsletter Website

Embassy Friends

Have you travelled overseas before?..... yes no

Have you visited www.swap.ca?..... yes no

SECTION 5

INSURANCE for the duration of SWAP stay is obligatory

Dr. Walter Travel and Education Ins.

SECTION 6

Vancouver Toronto Montreal Other

Date of journey: Length of stay:



Österreichisches Jugendherbergswerk
Austrian Youth Hostel Association

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