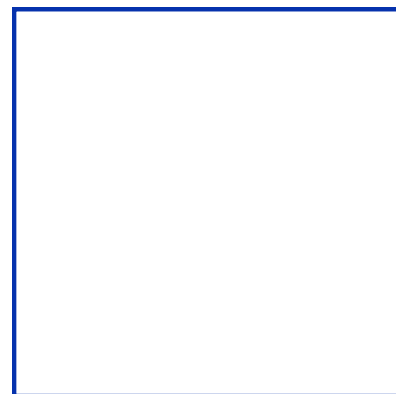




1. Program Information

The exchange is a non paid, non academic placement
Vocational service

☐ Individual

☐ Group

From

	District
	Club
	Multi-District

To

	District
	Club
	Multi-District

2. Applicant Information

Full Legal Name as on passport or birth certificate (use uppercase for your FAMILY name; e.g., John D)		Name You Wish to be Called
Gender	Full Address & Postal Code	Citizenship
E-mail Address		Date of Birth
Place of Birth		Mobile Phone Number

3. Emergency Contact

Full Name of Emergency Contact #1		Rotarian?	If yes, Name of the Rotary Club
Home Address - Street	City, State & Postal Code		Country
E-mail Address		Occupation	
Business Phone Number	Mobile Phone Number	WhatsApp (or fax)	
Full Name of Emergency Contact #2		Rotarian?	If yes, Name of the Rotary Club
Home Address - Street	City, State & Postal Code		Country
E-mail Address		Occupation	
Business Phone Number	Mobile Phone Number	WhatsApp	
In the event of an emergency, wich person should be contact first? ☐ #1 ☐ #2			



4. Sponsor District/Rotary Club

Sponsor District/Club Number	Sponsor District/Rotary Club
Sponsor District/Club NGSE Responsible Officer	Club NGSE Responsible Officer
Sponsor District/Club NGSE Responsible Officer Mobile Number	Sponsor District/Club NGSE Responsible E-mail

5. Personal Background

Religion	
Dietary Restrictions	
Do you smoke or use tobacco products? ☐ Yes ☐ No	If yes, please explain.
Do you drink alcohol? ☐ Yes ☐ No	If yes, please explain.
Have you ever used illegal drugs? ☐ Yes ☐ No	If yes, please explain.

6. Languages

Native Language:		Proficiency in Non-Native Languages		
Non-Native Language(s)	Years Studied	Speaking	Reading	Writing



7. Health Information

Please provide a copy of your prescriptions for any medications you will be continuing during the NGSE period.

Do you have any mental health / medical / dental condition?	☐ Yes ☐ No
Have you been treated for mental health/medical conditions in the past two years?	☐ Yes ☐ No
Have you taken any prescribed medications in the past six months?	☐ Yes ☐ No
Do you have any special health requirements (disabilities, allergies, etc.)?	☐ Yes ☐ No
If you have answered 'YES' to any of the above please explain fully in the space below providing as much information as possible, including the name of any medication and the reason prescribed	

8. Individual Exchange

Career- Please describe the objectives you hope to achieve through participation in the program.
Relevant Education/ Courses / Formal Competency
Work Experience (Current and/or Past)



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Applicant Name:

Experience/ skills/ Informal Competency			
Volunteer Experience – List past and current volunteer experience and roles			
Free time interest / Remarks			
Indicate your professional field/area of interest in the order of priority	1.		
	2.		
	3.		
Preferred Time Period		Preferred Duration	
Preferred Countries (in order of priority)	1.	2.	3.



9. Group Exchange

Please describe the objectives you hope to achieve through participation in the NGSE Group Exchange.

Relevant Education/ Courses / Formal Competency

Focus areas of Professional interests and accomplishments

Volunteer Experience – List past and current volunteer experience and roles

Particular experience/ skills/ Informal Competences that you want to mention

Free time interest & Activities / Additional Remarks



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Applicant Name:

New Generations Service Exchange Program

Curriculum Vitae / Resumé

Limited to 1 page



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Applicant Name:

New Generations Service Exchange Program

Motivation Letter

Limited to 1 page



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Applicant Name:

New Generations Service Exchange Program

Id Document

Upload a copy of the participant's ID document

New Generations Service Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

As a New Generations Service Exchange Program participant supported by a Rotary club or district, you must agree to the following rules and conditions of exchange. Violation of any of these rules may result in dismissal from the program and immediate return home, at your expense. Please note that districts may edit this document or insert additional rules if needed to account for local conditions. The mandatory insurance also must include a liability coverage such as Cisi Bolduc plan B.

Rules and Conditions of Exchange

1. You must obey the laws of the host country. If found guilty of violating any law, you can expect no assistance from your sponsors or native country. You must return home at your own expense as soon as released by authorities.
2. You will be under the host district's authority while you are an exchange program participant and must abide by the rules and conditions of exchange provided by the host district. Any relatives you may have in the host country will have no authority over you while you are in the program.
3. You are not allowed to possess or use illegal drugs. Medicine prescribed to you by a physician is allowed.
4. You must have travel insurance that provides coverage for accidental injury and illness, third party liability, death benefits (including repatriation of remains), disability / dismemberment benefits, emergency medical evacuation, emergency visitation expenses, 24-hour emergency assistance services, and legal services, in amounts satisfactory to the host Rotary club or district, with coverage from the time of your departure from your home country until your return.
5. You must purchase return travel ticket before departure from the home country.
6. You must attend all orientations and trainings offered by the Sponsoring and host Districts/Clubs.
7. You must have sufficient financial support to assure your well-being during your exchange.

New Generations Service Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

8. The host District/Club, host family must approve any other travel in writing, exempting Rotary of responsibility and liability.

9. Any costs related to an early return home or any other unusual costs (language tutoring, tours, etc.) are your responsibility.

10. You should communicate with your host family, if applicable, prior to leaving your home country. The family's information must be provided to you by your host club or district prior to your departure.

11. Talk with a Rotarian or other trusted adult if you encounter any form of abuse or harassment.

Permission for Medical Care and Release from Liability

I, the applicant, do release from liability and grant permission as noted of the following while I am participating as a New Generations Service Exchange program participant:

- In the event of accident or sickness, I authorize any Rotarian, authorized chaperones of Rotary activities, and/or host parent(s) of the student to select the appropriate medical facility and physician(s)/dentist(s) to provide treatment.

- I give permission for any operation, administration of anesthetic, or blood transfusion that a medical practitioner may deem necessary or advisable. - I further consent to any medical or surgical treatment by a licensed physician, surgeon, or dentist that might be required for any emergency situation.

I agree to hold harmless any Rotary District/Club, Rotarian, Rotary chaperone, or host family for any intervention in an emergency situation regardless of final outcome.

I agree to assume all financial obligations beyond those covered by insurance for any medical treatment rendered.

New Generations Service Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

Statement of Conduct for Participating in NGSE.NET

NGSE.NET strives to create and maintain a safe environment for all people who participate in NGSE.NET activities. To the best of their ability, Rotarians, Rotarians' partners, and all other volunteers must safeguard all participants with whom they come in contact. They must protect them from physical, sexual or emotional abuse and harassment.

"I have read, understood and agree to adhere to this statement of conduct"

Participants Name	Signature	Date (dd.mm.yyyy) & Place
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New Generations Service Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

Indemnification and Liability Protection Clause

This Agreement includes an indemnification clause to protect both involved Districts from any possible negligence claims. Each District agrees to indemnify, defend, and hold harmless the other District, its officers, employees, and agents from and against any and all claims, liabilities, damages, losses, and expenses, including reasonable attorney's fees, arising out of or in any way connected with any act or omission by the indemnifying District, its officers, employees, or agents, in the performance of this Agreement.

"I have read, understood and agree to adhere to this statement"

Participants Name	Signature	Date (dd.mm.yyyy) & Place
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New Generations Service Exchange Program

Rules and Conditions of Exchange, Permissions and Declarations

Applicant's Declaration

IN CONSIDERATION of the acceptance and participation of the applicant in this program, the undersigned APPLICANT to the full extent permitted by law, hereby releases and agrees to defend, hold harmless, and indemnify all host parents and members of their families, and all members, officers, directors, committee members, and employees of the host and sponsor Rotary clubs and districts, from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of any negligent act or omission, excepting gross negligence or intentional conduct, of any such persons or entities, which may be suffered or claimed by such applicant, parent, or guardian during, or as a result of, the participation by the applicant in such Youth Exchange program, including travel to and from the host country.

As the undersigned applicant I declare that:

- I have read and understood the Program Rules and Conditions of Exchange and agree to abide by these rules and others imposed on me with due notice during my time as an exchange student in the host country.
- I am in good health and as a New Generations Service Exchange participant understand the importance of the role of an ambassador and, should I be chosen to represent my Sponsoring Rotary club / district, school, community, state/province, and country will, to the best of my ability, maintain the high standards required. I further state that all the details entered by me in this application and the attached documents are true and accurate to the best of my knowledge.
- I purchase round-trip air travel before I depart my home country;
- I attend all orientations and trainings offered by my sponsor and host Districts/Clubs, and return home after completion of my exchange.

New Generations Service Exchange Program

Recommendations and Privacy Policy

for a Successful Exchange

1. Smoking is discouraged. If you state in your application that you do not smoke, you will be held to that position throughout your exchange.

2. If placed in a host family, respect your host's wishes. Become an integral part of the family, assuming duties and responsibilities normal for a person of your age or for children in the family.

3. Make an effort to learn the basics of the language of the host

Privacy Policy

Use of Personal Data. Your privacy is important to Rotary. The personal data you provide will be used to facilitate your exchange and will be shared with the Sending and Hosting Rotary District Organizations and Clubs, your appointed counselor, host families, and/or any other entities affiliated with the student's exchange. It will only be used for official RI business and Alumni activities; it will not be sold to or shared with third parties, unless its release is required by law. Photos of program participants taken during Rotary events may be used for program promotion.

Privacy Statement. If you are accepted into the Rotary NGSE program, this application and the information contained within will be shared with various Rotary related entities including the District/Club where you live, the District/Club that will be hosting your exchange and Rotary International. This information may also be shared with others associated with administering the program including exchange counselors and host families. To correct or delete any personal information or for further information contact your District Data Protection Officer.

Signed Applicant	Signed Witness (Rotary Club representative)	Date (dd.mm.yyyy)
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Sponsor Club/District Endorsement

The Rotary Club/Rotary District specified within this section, having interviewed the applicant and having reviewed the application, hereby endorse the student as qualified for New Generations Service Exchange and recommend to hosting clubs and districts the acceptance of this applicant. The District agrees to provide adequate orientation to the applicant before departure.

Sponsor District/Club No. D3490	Sponsor Rotary Club
Sponsor District/Club Responsible NGSE Officer Norman Chen	Name of Club President
E-Mail Address of NGSE Responsible Officer damage.chen@gmail.com	E-Mail Address of Club President
Signature of District/Club Responsible Officer 	Signature of Club President
Date (dd.mm.yyyy) 01/09/2026	Date (dd.mm.yyyy)

Guarantee Form

Full Legal Name as on passport or birth certificate (use uppercase for your FAMILY name; e.g., John D)			Name You Wish to be Called	
Gender	Full Address & Postal Code			Citizenship
E-mail Address		Date of Birth	Home Phone Number	
Place of Birth			Mobile Phone Number	



Host District/Club

We, the Host Rotary Club and District will provide room and board in approved homes, invite the applicant to participate in Rotary club and district events and activities typical of our country, and provide guidance and supervision to assure the applicant's welfare. The host Rotary District agrees to provide adequate training for host parents and NGSE Exchange volunteers and orientation for the participant upon his/her arrival. (if applicable for this exchange)

Host Country	Host District No.	Host Club Name	Host Club ID No.
Name of District/Club Responsible NGSE Officer		Name of Club President	Name of Club NGSE Officer (if applicable)
E-Mail Address of NGSE Responsible Officer		E-Mail Address of Club President	E-Mail Address of Club NGSE Officer
Signature / Date		Signature / Date	Signature / Date

Host District/Club Counselor (Individual Exchanges only)

Name		E-Mail Address	
Home Address - Street	City, State & Postal Code		Country
Mobile Phone Number		Home Phone Number	

Host Family (if applicable)

Name of Host Father	Host Father's E-Mail Address	Home Phone	Mobile Phone
Name of Host Mother	Host Mother's E-Mail Address	Home Phone	Mobile Phone
Home Address - Street	City, State & Postal Code		Country
Names and Ages of any other Adults in the Home			