Students Without Borders Academy
School District #22 (SWB.A.15)

STUDENT APPLICATION PACKAGE (2024-2025)

SWB.A. **Attention: Dave Fehr**
Kalamalka Secondary School
7900 McClounie Road.
Vernon, BC V1B1P8
PHONE: **(250) 545-1396**
DFEHR@SD22.BC.CA ***SWBA.CA***

APPLICATION DEADLINE: FRIDAY, MARCH 1st 2024

A desk is a dangerous place from which to watch the world. **- John le Carre**

Essential data: please PRINT

ATTACH RECENT PHOTO

NAME: FIRST _____ LAST _____

MAILING ADDRESS: _____

_____

CITY: _____ POSTAL CODE: _____

CURRENT GRADE: _____ CURRENT SCHOOL: _____

STUDENT EMAIL: _____ STUDENT PHONE:_____

PARENT EMAIL: _____ PARENT PHONE:_____

PARENT GUARDIAN 1 NAME: _____ PARENT GUARDIAN 2 NAME: _____

Would you like email sent to an alternate address – other than ABOVE? _____

ARE YOU A CANADIAN CITIZEN? YES NO DO YOU HAVE A PASSPORT? YES NO

Participation in this world class program is a privilege. Students participating in the *SWBA* program are ambassadors. Due to the sensitive issues involved in this program, the teacher and school administrators reserve the right to withdraw from the course, at any time, any student who is, in their opinion, jeopardizing the safety of individuals or the group or jeopardizing the integrity of the program.

I have read the Program Information Package, explored the SWBA.CA website and understand the requirements for successful completion of the SWBA program as well as the requirements for International Travel. I understand that failure to adhere to these requirements may result in my withdrawal from the program.

Student Signature: _____ Date: _____

Parent 1 Signature: _____ Date: _____

Parent 2 Signature: _____ Date: _____ (optional)

NAME: _____

SWBA, School District #22 - **STUDENT APPLICATION FORM**

Please answer the following questions in your own writing/printing. There are no right or wrong answers.
All information will be kept confidential.

1. What inspired you to sign up for the SWBA Program?

_____
_____
_____

2. What do you hope to learn from this program?

_____
_____
_____

3. What special strengths, gifts, and/or contributions would you bring to the success of this program? Please elaborate:

- ❑ Computer Skills _____
- ❑ Singing Skills _____
- ❑ Language Skills _____
- ❑ Athletic Skills _____
- ❑ Photography Skills _____
- ❑ Public Speaking Skills _____
- ❑ Musical instrument Skills _____
- ❑ Technical Skills (wood working, mechanical) _____
- ❑ Writing Skills _____
- ❑ Other(s)_____

4. Do you have any phobias? Example: Are you uncomfortable around insects/water/crowds?

(Circle appropriate) YES / NO IF YES – EXPLAIN BELOW:

_____

_____

5. What are your scholastic goals? What are your career ambitions?

_____

_____

6. Please rate yourself on the following areas (place an X in the appropriate box):

	excellent	good	fair	poor
Attendance				
Grades				
Work Ethic/ Discipline				
Team Player				
Ability to work independently				
Willingness to lead				
Willingness to follow				

7. Please rate yourself on the following areas:

	excellent	good	fair	poor
Swimming				
Eating what is prepared – not being picky				
Being adventurous				
Adapting to situations/Being flexible				
Physical health – strong immune system				
Emotional health				
Fitness level – Activity levels are high				
Global awareness				
Taking responsibility				

8. Describe your travel experiences to date. What countries have you visited? What was the nature of each trip? (study, tourism, visiting family, etc.)

_____

_____

9. What do you think might be the most challenging aspect of this program for you? Why?

_____

_____

10. In order to participate in the extended field trip associated with this program, students must be physically and emotionally healthy. Please comment on your physical and emotional health. List any illnesses or conditions that may in any way affect you in your travels.

_____

_____

11. DO YOU HAVE ANY ALLERGIES? YES NO If yes, please explain

_____

12. FOR TRAVEL PURPOSES, DO YOU HAVE A VALID VACCINE PASSPORT YES NO

12. Are you a vegetarian – or do you have any other dietary concerns? YES NO If yes, please explain:

_____

STUDENTS WITHOUT BORDERS ACADEMY

School District #22

CODE OF ETHICS COVENANT PAGE: submit this page with your application

Upon reading the SWBA info package (AVAILABLE AT SWBA.CA) and agreeing with the SWBA code of ethics, fill in names and sign where appropriate on the application. Include the signed covenant (pledge) in your application package.

The success of the ***SWBA*** program depends ultimately on the mutual respect students display in words and action both amongst themselves and with members of the international community. It is imperative that students and parents/guardians enter this *SWBA* Program fully in agreement with the CODE OF ETHICS standards that form the foundation for a successful field trip and international community service experience.

Failure to adhere to the code of ethics may result in a student being withdrawn from the *SWBA* program or international trip. Should this occur, the student and his or her parents/guardians will be responsible for any additional costs that might be incurred.

As the parent(s)/guardian(s) of the applicant, I give permission for my son/daughter to apply for:

Students Without Borders Academy.

We (student applicant and parents/guardians) agree to comply with the student code of ethics.

Print full student name above	Date (mm/dd/yyyy)
Student signature:	

Print parent/guardian name above	Date (mm/dd/yyyy)
Parent/guardian signature:	

Print parent/guardian name above	Date (mm/dd/yyyy)
Parent/guardian signature:	

STUDENTS WITHOUT BORDERS ACADEMY

Student application: Teacher reference form

Dear Teacher,

You have been carefully selected to fill out a reference form. Please take a few moments to let the selection committee know how much you would like to travel with the student named below. I am interested in group safety and responsibility. The group will be on the water, in the jungle, and in foreign, extra-cultural situations. We will also be in close quarters for a period of five weeks. THIS IS A VERY IMPORTANT DOCUMENT FOR THE PROGRAM. All information remains confidential.

Please return the form to the applicant, inside a sealed envelope. Please sign across the seal.

STUDENT NAME: FIRST _____ LAST _____ CURRENT GRADE: _____

How long have you known this student? 1 2 3 4 5 6 7 8 + years (circle appropriate)

How well do you know the applicant? *Slightly* *Somewhat* *Well* (circle appropriate)

Please circle the most appropriate number (1 being not so much – 10 being absolutely)

- I would trust this student to be on time for group meetings 1 2 3 4 5 6 7 8 9 10
- This student is able to work in groups 1 2 3 4 5 6 7 8 9 10
- This student listens to instructions the first time 1 2 3 4 5 6 7 8 9 10
- This student is respectful of all students 1 2 3 4 5 6 7 8 9 10
- This student is emotionally mature 1 2 3 4 5 6 7 8 9 10
- This student responds to classroom stress appropriately 1 2 3 4 5 6 7 8 9 10
- This student can work independently 1 2 3 4 5 6 7 8 9 10
- This student is fit for day cycle trips and/or rigorous hikes 1 2 3 4 5 6 7 8 9 10
- This student follows through with commitments 1 2 3 4 5 6 7 8 9 10
- I would take this student on an international trip 1 2 3 4 5 6 7 8 9 10
- With supervision, this student could complete online coursework 1 2 3 4 5 6 7 8 9 10

In summary, your recommendation for this student (circle appropriate response below):

HIGHLY RECOMMENDED / RECOMMENDED / NOT RECOMMENDED

TEACHER NAME: _____ SCHOOL: _____

Additional comments below (or if you prefer by email dfehr@sd22.bc.ca)

FOR FURTHER INFORMATION ON THE PROGRAM PLEASE GO TO: ***SWBA.CA***

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STUDENTS WITHOUT BORDERS ACADEMY

Student application: Non-Teacher/Non-Family reference form

Thanks for your time,

You have been carefully selected to fill out a reference form. Please take a few moments to let the selection committee know how much you would like to travel with the student named below. I am interested in group safety and responsibility. The group will be on the water, in the jungle, and in foreign, extra-cultural situations. We will also be in close quarters for a period of five weeks. THIS IS A VERY IMPORTANT DOCUMENT FOR THE PROGRAM. All information remains confidential.

Please return the form to the applicant, inside a sealed envelope. Please sign across the seal.

STUDENT NAME: FIRST _____ LAST _____

How long have you known the applicant? 1 2 3 4 5 6 7 8 + years (circle appropriate)

How well do you know the applicant? *Slightly* *Somewhat* *Well* (circle appropriate)

In what capacity do you know this student: _____

Please circle the most appropriate number (1 being not so much – 10 being absolutely)

- I would trust this applicant to be on time for group meetings 1 2 3 4 5 6 7 8 9 10 na
- This applicant is able to get along in groups 1 2 3 4 5 6 7 8 9 10 na
- This applicant listens to instructions the first time 1 2 3 4 5 6 7 8 9 10 na
- This applicant is respectful of all age groups 1 2 3 4 5 6 7 8 9 10 na
- This applicant is emotionally mature 1 2 3 4 5 6 7 8 9 10 na
- This student is fit for cycle trips and/or rigorous hikes 1 2 3 4 5 6 7 8 9 10 na
- This applicant responds to stress appropriately 1 2 3 4 5 6 7 8 9 10 na
- This applicant can work independently 1 2 3 4 5 6 7 8 9 10 na
- This applicant follows through with commitments 1 2 3 4 5 6 7 8 9 10 na
- I would take this applicant on an international trip 1 2 3 4 5 6 7 8 9 10 na
- With supervision, this student could complete online coursework 1 2 3 4 5 6 7 8 9 10 na

In summary, your recommendation for this student (circle appropriate response) :

HIGHLY RECOMMENDED / RECOMMENDED / NOT RECOMMENDED

YOUR NAME: _____ EMAIL: _____

Additional comments below (or if you prefer by email dfehr@sd22.bc.ca)

FOR FURTHER INFORMATION ON THE PROGRAM PLEASE GO TO: ***SWBA.CA***

STUDENT APPLICATION PACKAGE CHECKLIST

APPLICATION CHECKLIST:

- I HAVE READ THE PROGRAM INFORMATION PACKAGE
- I HAVE EXPLORED THE WEBSITE **SWBA.CA**
- I HAVE READ AND SIGNED THE CODE OF ETHICS
- I HAVE THOUGHTFULLY COMPLETED THE STUDENT APPLICATION FORM
- I HAVE COLLECTED THE COMPLETED TEACHER REFERENCE FORM IN A SEALED AND SIGNED ENVELOPE - OR IT IS BEING DIRECTLY EMAILED TO DFEHR@SD22.BC.CA
- I HAVE COLLECTED THE COMPLETED NON TEACHER REFERENCE FORM IN A SEALED AND SIGNED ENVELOPE - OR IT IS BEING DIRECTLY EMAILED TO DFEHR@SD22.BC.CA
- I HAVE ATTACHED A RECENT PHOTOGRAPH TO THE ESSENTIAL DATA PAGE

- **IT IS NOT MANDATORY – BUT IS CONSIDERED GOOD FORM TO ATTACH A COVER LETTER. THE COVER LETTER INTRODUCES SWBA STAFF TO WHO YOU ARE AND MIGHT EXPLAIN AREAS OF STRENGTH NOT TOUCHED ON BY THE APPLICATION. YOU MIGHT EXPLAIN SOME OF YOUR CHARACTERISTICS ON THE *SWBA Student Characteristics* LIST FROM THE SELECTION REQUIREMENTS PAGE**
- **YOU MAY ALSO ATTACH FURTHER REFERENCES IF YOU FEEL YOUR APPLICATION WILL BE WELL SERVED BY DOING SO**

- I HAVE PLACED ALL THE APPROPRIATE APPLICATION FORMS INTO A MANILA ENVELOPE:
  - ✓ CODE OF ETHICS - COVENANT PAGE
  - ✓ APPLICATION QUESTIONS (TWO PAGES – 12 QUESTIONS)
  - ✓ TEACHER LETTER OF REFERENCE (IN SEALED ENVELOPE) OR SENT BY EMAIL
  - ✓ NON TEACHER LETTER OF REFERENCE (IN SEALED ENVELOPE) OR SENT BY EMAIL
  - ✓ ESSENTIAL DATA SHEET WITH PHOTO (SINGLE PAGE)

- I HAVE MAILED (or delivered to Kalamalka Secondary School) THE COMPLETED PACKAGE IN ADVANCE OF THE DEADLINE TO:

***SWBA* Attention: Dave Fehr**
Kalamalka Secondary School
7900 McClounie Road.
Vernon, BC V1B 1P8

PHONE: **(250) 545-1396**

DFEHR@SD22.BC.CA ***SWBA.CA***

APPLICATIONS MUST BE RECEIVED BEFORE: MARCH 1st 2024

***A desk is a dangerous place from which to watch the world.* - John le Carre**