



WORLD EXPERIENCE
 Teenage Student Exchange
 2440 S. Hacienda Blvd. Suite 116
 Hacienda Heights, CA 91745
 Phone: (626) 330-5719 • Fax: (626) 333-4914

Please attach
 two small, recent
 photos of
 yourself in the
 area to the right.



PRELIMINARY STUDENT APPLICATION

DATE _____

STUDENT NAME (Last, First, Middle) _____

PARENT/GUARDIAN #1 (Full Name) _____

STREET ADDRESS (City, State, Zip) _____

LIVING OR DECEASED? _____

HOME PHONE _____ E-MAIL _____

OCCUPATION _____ COUNTRY OF BIRTH _____

BIRTHDATE _____ COUNTRY OF BIRTH _____

PARENT/GUARDIAN #2 (Full Name) _____

NAME OF HIGH SCHOOL CURRENTLY ATTENDING _____

LIVING OR DECEASED? _____

GRADE LEVEL _____ GRADE POINT AVERAGE _____

OCCUPATION _____ COUNTRY OF BIRTH _____

LIST FOREIGN LANGUAGES YOU SPEAK _____

ARE PARENTS/GUARDIANS DIVORCED OR SEPERATED? YES NO

WHICH ONES HAVE YOU STUDIED? WHERE & WHEN _____

IF YES, WHO IS LEGAL GUARDIAN? _____

COUNTRY CHOICES: List three countries of your choice in the order of preference.

1st CHOICE _____

2nd CHOICE _____

3rd CHOICE _____

PROGRAM CHOICE: Check one, making sure the program is offered to the countries you have selected.

20 _____

SUMMER ONE SEMESTER TWO SEMESTERS

DEPARTURE: JANUARY AUGUST

MAIL TO: WORLD EXPERIENCE
 2440 S. Hacienda Blvd. Suite 116
 Hacienda Heights, CA 91745

FAX TO: 1.626.333.4914

E-MAIL TO: info@weworld.com

