

BUDGET

Outline how you intend to use the grant (attach receipts, if available):

EXPENSE	AMOUNT (US DOLLARS)	EXPENSE	AMOUNT (US DOLLARS)
Program Fees	\$ _____	Housing & Meals	\$ _____
Airfare	\$ _____	Travel Insurance	\$ _____
Local Transportation	\$ _____		
Passport & Visa Fees	\$ _____	Total	\$ _____

Explain why you are seeking financial assistance and whether you will receive other funding to participate in your program:

ESSAYS

Personal Essay: Please provide an essay (1-2 pages) that answers the following question:
How will your international work opportunity contribute to better cross-cultural understanding?

Supplemental Essay: Please choose **one** of the following questions & provide a short essay (2-3 paragraphs):

1. Explain how your chosen Working Abroad experience will enrich your understanding of the world.
2. What do you wish to learn about the country where you will live and the culture of the people there?

APPLICATION CHECKLIST

Your application must consist of the following items:

- Completed and signed Application Form
- Personal Essay
- Supplemental Essay
- Resume
- Two Letters of Recommendation - Signed and Sealed
- Photocopy of U.S. Passport or Permanent Resident Card

Mail complete applications to:

ATTN: Grant Selection Committee
 InterExchange Foundation
 InterExchange, Inc.
 161 Sixth Avenue, 10th Fl.
 New York, NY 10013

Deadlines: 8 weeks prior to program start date

AGREEMENT

I, the undersigned, certify and agree that:

- I have read the relevant InterExchange Foundation pages on the InterExchange website thoroughly and I am eligible to apply for an InterExchange Grant;
- All the information I have provided in this application is truthful and accurate;
- If awarded an InterExchange Grant, I will submit a written report upon completion of my program describing how the grant allowed me to gain international understanding through working abroad;
- My report and any photos/videos I submit will become the property of the InterExchange Foundation and may be used in promotional materials;
- If I do not complete my program abroad, I will return the grant in full to the InterExchange Foundation;
- I will not hold InterExchange, Inc. liable for my personal welfare during my program participation abroad. InterExchange, Inc. and the InterExchange Foundation assume no responsibility or obligation beyond providing the grant.

Signature of Applicant: _____

Date: _____

MM/DD/YYYY