



in partnership with



**Global Impact**

International Service Learning  
in the Developing World

# Global Impact 2017 APPLICATION

**Deadline June 1**

## PERSONAL INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Male      Female      Date of Birth\* \_\_\_\_\_ Food Restrictions? \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Passport Number if available: \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Do you have any physical limitations that may require accommodations?    Yes    No \_\_\_\_\_

If you are affiliated with a college/university, please list \_\_\_\_\_

If you are employed full or part time, please list employer \_\_\_\_\_

\* Global Impact participants must be 18 or older at the time of trip, or 16 if accompanied by a responsible adult family member and with a signed release statement.

## EMERGENCY CONTACT DETAILS

Name of Contact \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Permanent Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

### WHICH PROGRAM ARE YOU APPLYING FOR?

**See website for program cost**

**Discover Laos (August 21—September 1, 2017)**

**Experience India (August 20—September 3, 2017)**

**Ghana Expedition (August 20—September 3, 2017)**

**Magical Morocco (August 20—September 3, 2017)**

*Note: Please add 1-2 days for travel to and from location. Fee does not include airfare, visas, gratuities to host staff (\$40-50), immunizations, and personal expenses*

**If applicable, please indicate a secondary program\_\_\_\_\_**

**Mandatory Orientation/Training is set for all day June 24 (9am-4pm). A second program-specific orientation will be held after this date and organized by group leader(s).**

Global Impact programs are focused on comprehensive global health initiatives. Strategically, we see the greatest improvement can be made in the health and well being of communities through infrastructure development projects (clean burning stove and water filter installations, for example) and health education. Our projects will always include the following three elements: community infrastructure development, health education campaigns and healthcare clinics. We expect that all participants will be involved in the full range of projects on our trips. See more details on the Global Impact website.

### **EDUCATIONAL BACKGROUND**

**Please indicate your most recent educational experiences.**

College or University\_\_\_\_\_

Program of Study \_\_\_\_\_

Education/Program Standing at the time of your participation in the program: \_\_\_\_\_

College or University\_\_\_\_\_

Program of Study \_\_\_\_\_

Education/Program Standing at the time of your participation in the program: \_\_\_\_\_

Foreign Languages:

List what languages you speak and if you are

*Beginner*

*Intermediate*

*Advanced*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Note about foreign languages:

### **PERSONAL EXPERIENCE AND QUESTIONS**

Please, describe your experience in the following categories:

Travel to foreign countries:
Cross-cultural experience:
Leadership Experience:
Working in groups:
Small project management:
Communications (writing, drama, public speaking):
Flexibility/Adaptability:

**QUESTIONS (3-4 SENTENCES each) Your answers will help us prepare a successful program for you.**

1. What skills do you hope to gain during your Global Impact program?
2. What skills/experience do you hope to share during the Global Impact program?
3. What are your hobbies and other interests?
4. What is your primary motivation for participating in this specific program?
5. Traveling to and living in another country can be overwhelming for some individuals and exciting for others. Describe the qualities you have that will allow you to adjust to this new environment.
6. You will be working in a group environment and teamwork is crucial. Describe the qualities you have that will help you adapt to this type of program.

**APPLICANT'S SKILLS: (Please attach a recent resume if you are a working professional or have medical certifications)**

- Are you more skilled in working with **Infants Children Teens Adults Elderly?**
- Please list specific credentials/ certifications that you have that are current ( first aid, CPR, teaching, computer networking, etc)

*Please assess your skills based on the following numerical scale. Respond to this section even if you provide us with a resume. {Please explain any acronyms used}*

*1- No Knowledge*

*2- Some Knowledge*

*3- Competent*

*4- Expert*

**GENERAL EDUCATION**

Teaching sports

Specify sport(s) \_\_\_\_\_

Teaching English

Teaching other subjects

Specify subject(s) \_\_\_\_\_

**SPECIAL SKILL TRAINING**

Business planning/marketing (Small scale industry)

Income generation activities (e.g. sewing, pottery, knitting etc.)

Construction projects: houses, buildings, other

Computers

Bicycle Repair

Photography

Agriculture/farming

Other skills: \_\_\_\_\_

**ARTS AND CRAFTS**

Dance

Drama and role play

Music

Graphic arts

Painting/drawing/sculpting

Paper crafts

Other: \_\_\_\_\_

**COMMUNITY BASED**

Social work (e.g. recording patients' histories, liaising, motivating people for a cause, distributing medicines/birth control devices etc.)

Research for social/cultural/medical/educational issues

Working with women's groups:

Health issues

Small business activities

Cultural exchange

Nursery work – caring for children

Other: \_\_\_\_\_

**THERAPEUTIC WORK -- SPECIAL EDUCATION**

Physical/Speech/Occupational Therapy

Describe \_\_\_\_\_

**HEALTH EDUCATION**

Hygiene training

Sanitation

Oral Hygiene

Other \_\_\_\_\_

Nutrition

**MEDICAL**

*If you are a medical professional, please indicate your certifications, your field, your current employer (or past if retired) and if you have any specific area(s) of specialization. You will be likely be asked for a copy of your license in order to practice on our projects.*

**YOUR SKILLS:** Please indicate which of the skills listed above **you would most like to use and share** while in the program. (1 being the most interested, etc.) **These don't necessarily have to be the areas in which you have the highest level of skill.**

1

2

3



# Global Impact Mandatory Participant Health Form

Global Impact programs and projects may be carried out under both physically and emotionally demanding conditions. We are at times working at high altitudes, in the jungles, in hot/humid conditions or even below freezing. These conditions can aggravate health conditions which you may be able to control at home. Please do not apply for our programs if you have serious health conditions.

It is important that we know about any health conditions that might require accommodations of some type to keep you safe as well to keep projects running smoothly. The information you are being asked to provide below will be shared with group leaders and the director of the host program abroad on a need to know basis as it relates to the program requirements.

**Participant Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Program you are applying to join:** \_\_\_\_\_

**HEALTH NOTES (PLEASE BE THOROUGH AND EXPLAIN ALL ISSUES)**

Operations/Serious Injuries (w/ dates): \_\_\_\_\_

Mobility or Physical Impairment Issues: \_\_\_\_\_

Chronic/Recurring Illness or Conditions: \_\_\_\_\_

Mental Health Issues: \_\_\_\_\_

Dietary Restrictions (food allergies, vegetarian, vegan, kosher, etc): \_\_\_\_\_

Current Medications: \_\_\_\_\_

Additional notes or concerns: \_\_\_\_\_

**HEALTH ISSUES (CHECK ALL THAT APPLY) and give dates, if possible.**

Frequent Ear Infections: \_\_\_\_\_

Heart Defect/Disease: \_\_\_\_\_

Convulsions: \_\_\_\_\_

Diabetes: \_\_\_\_\_

Bleeding/Clotting Disorders: \_\_\_\_\_

Hypertension: \_\_\_\_\_

Mononucleosis: \_\_\_\_\_

Chicken Pox: \_\_\_\_\_

Measles: \_\_\_\_\_

German Measles: \_\_\_\_\_

Mumps: \_\_\_\_\_

Hay Fever: \_\_\_\_\_

Asthma: \_\_\_\_\_

Poison Ivy, etc: \_\_\_\_\_

Insect Stings: \_\_\_\_\_

Allergies of any type, including drug allergies: \_\_\_\_\_

Other: \_\_\_\_\_

**By checking the box on the left I verify that I have disclosed all necessary health information and that all information above is true and accurate to the best of my knowledge. I understand that failure to fully disclose any health conditions may result in my removal from the Global Impact program.**



Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## APPLICATION INSTRUCTIONS

Please submit this application form including the non-refundable \$200 application fee/deposit. You will receive a FULL refund on your program deposit and program fee if you are not accepted into the Global Impact program you are applying to or the alternate program if indicated. We will continue to accept applications until programs are full, preferably prior to Orientation/Training on June 24th. Program deposits are applied to the total program fee. Applications are accepted throughout the year and are subject to limited space availability. Payment of your deposit secures your position in the Global Impact Program unless you are notified that you are not admitted. Applications will not be considered without an application fee/deposit. Payment in full is required by **June 24, 2017**.

I hereby agree that I have fully read and understand the payment account terms and that I authorize Seattle Colleges to charge the specified credit card for payment of my Global Impact bill. I understand that terms of my Global Impact Agreement remain in full force and effect.

I will pay the \$200 non-refundable application fee/deposit by:

**Check** (check included) Please make your check payable to **Seattle Colleges\***  
**Credit Card** (Info below)

Name on Card \_\_\_\_\_

Card Type & Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Security Code (3 digits on back) \_\_\_\_\_ Phone # of cardholder: \_\_\_\_\_

Address of cardholder: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

## REFUND POLICY

The program deposit of \$200 will be applied towards the total program fee. The program deposit is non-refundable for Participants who have been accepted into the program. The program deposit will be fully refunded to Participants who are not accepted to the program. If the Participant cancels for any reason, including lack of funding or a scholarship, the Participant must notify the Associate Vice Chancellor of Global Initiatives/Seattle Colleges in writing (email is acceptable). The cancellation will be effective upon receipt of the written notification. Careful planning goes into developing study abroad and volunteer programs. As a result, there are substantial administrative and planning costs prior to the start of each program. Participants who cancel more than 45 days prior to the published program start date will receive a refund on the program fee paid, less the deposit. Individuals who cancel 15-44 days prior to the program start will receive a 50% refund on the program fee paid, less the deposit. Participants who cancel 14 days or less prior to the published program start or during the program will not receive a refund. Trip cancellation insurance is recommended.

## SCHOLARSHIPS

A scholarship application is completely separate from this application and deposit. Please note that you should not apply unless you are able to make full payment irregardless of a scholarship decision. Although limited scholarship funds are available to Seattle Colleges students, it is in no way guaranteed and amounts are not substantial (range \$250-\$1,500). Your \$200 deposit will not be refunded if you apply for a scholarship and do not receive one or it is not the desired amount. Scholarships will also not pay or be applied to your non-refundable deposit. Scholarship applications are due in the Seattle Central International Education Programs Office March 1st and recipients will be notified within 15 days if they have received an award. If this funding is essential to your participation, please apply to a Global Impact program that is still open after you have received notice of an award—or plan to forfeit your deposit if you do not receive an award. Please note that some programs may be full by this date. Note: students from other colleges/universities may have access to scholarships from their own school. Please check with your study abroad office.

## TRIP CANCELLATIONS

Seattle Colleges reserves the right to cancel any program prior to May 1st if there are insufficient registrants or at any time prior to the trip start date if the Seattle Colleges determines it is in the best interest of the safety of programming to cancel the program. Seattle Colleges is not responsible for other costs incurred by applicants preparing for the trip. Should a program be canceled, applicants will be offered the option of positions in other programs or a full refund on all fees paid. Participants should not purchase airfare until notified that there is sufficient enrollment to offer the trip. These decisions are made by May 1st. Trip cancellation insurance is highly recommended.

**MEDICAL INSURANCE (including repatriation of remains and medical evacuation)**

Seattle Colleges requires that all participants have a medical policy that will cover them during their participation—and that includes medical evacuation and repatriation of remains. For participants residing in the USA, Seattle Colleges has secured a discounted rate for the iNEXT policy which is \$32 for one calendar year (August 1-July 31) any time you are overseas. This policy includes basic medical and the med evacuation/repatriation of remains. You will automatically be billed for this policy unless we receive proof that you have a policy already which provides basic medical, medical evacuation and repatriation of remains **before May 15th**. We will need a photocopy of your insurance card with your name and the fine print of medical evacuation and repatriation of remains coverage for our records.

**PROGRAM FLEXIBILITY AND SAFETY**

Service learning programs are different from travel or adventure programs. Each project is unique and often cannot be implemented exactly as planned due to the numerous community partnerships involved—as well as other factors. Applicants are advised that these variables may require changes before or during a program. Part of the challenge and growth opportunity is in adapting to changing conditions and overcoming the obstacles they may present.

**BEHAVIORAL EXPECTATIONS**

By joining a Seattle Colleges Program, the participant assumes certain obligations to the Seattle Colleges, its community, and other program participants. If designated program leaders (host country leaders or Global Impact leaders) determine a participant fails to meet the behavioral expectations set out in this contract, that participant will be warned and may be asked to leave the program. Participants asked to leave under these circumstances will not receive a refund. In addition to other program responsibilities, as a program participant you are responsible for:

- Being in sufficient good health to undertake the program
- Acting in an appropriate and respectful manner towards the local people, fellow travelers, program participants, and staff in accordance with the customs, laws, regulations, and ordinances of the country in which your program is located.
- Communicating effectively your interests, skills, limitations, and needs to home community members and program staff members.

**My signature below verifies that all information I have provided in this application is true and correct, and that I have read and agree with all of the Terms & Conditions of this application and of joining a Global Impact program.**



Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

<p><b>Please send:</b></p> <p><input type="checkbox"/> Application</p> <p><input type="checkbox"/> Application fee/non-refundable deposit</p> <p><input type="checkbox"/> Resume</p> <p><input type="checkbox"/> Photocopy of Passport Photo Page (if available)</p> <p><input type="checkbox"/> Unofficial transcript (for students)</p> <p><input type="checkbox"/> Signed Release Statement for your program (download from website)</p> <p><b>We require actual signatures on the application (this page and mandatory health page) and Release statement. If you are submitting electronically, please print out the 3 pages with signatures and scan/fax or mail to us.</b></p>
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**Send applications to:**  
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