



APPLICATION FOR WORK AND TRAVEL USA 2019

PERSONAL INFORMATION

Please attach
your photo
passport size

Surname :	Name :	
Date of birth : (Day/Month/Year)	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Place of birth:
Country of birth:	Skype ID :	Email address:
Citizenship:	Home telephone:	Mobile telephone:
Address , town ,postal code:		

EMERGENCY CONTACT

Name and surname:	Relation to you:	Telephone number:
Address of the contact:		
E-mail address:	Is the emergency contact speaking English language? Yes No	

Mother name and surname:	Telephone number mobile	Telephone number home:
Father name and surname:	Telephone number mobile	Telephone number home:
Are you applying together with a friend? <input type="checkbox"/> yes <input type="checkbox"/> no Name of your friend?		



Year of study at the Faculty:	University :
Faculty:	
Town :	Country:
Official University summer break:	
Available dates for work:	
Preferred work destinations? _____	

HEALTH

- Do you have health problems? Do you receive any medications? _____
- Have you ever been arrested or under investigation? _____
- Have you previously been to USA?_ Who was your sponsor? _____
- Have you participated in US summer work and travel? _____
- Have you ever been refused US visa? _____
- Do you have relatives in US? _____
- How did you find about Asteria World Work-Summer Work and Travel Program?
(Facebook, posters, friends, advertisement, etc) _____

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- Please describe yourself and your personal characteristics, your hobbies, interests, competences in a few sentences?



I, the undersigned, with full moral responsibility, hereby declare that all the information provided in this application form is true and valid. I also understand that providing false, incorrect information will lead to cancelation of the program.

Name:

Date: