



St Joseph's College

Gregory Terrace

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FORM 1

PLEASE RETURN THE COMPLETED APPLICATION PACK TO **MRS TODD** IN THE COLLEGE DEAN'S OFFICE (TREACY CENTRE) BEFORE

FRIDAY 1 FEBRUARY 2019

NB : This exchange is open to current Year 11 students who are studying French

PLEASE PROVIDE A RECENT
COLOUR PHOTO WHICH
SHOULD SHOW YOU SMILING.
WRITE YOUR NAME ON THE
BACK OF THE PHOTOGRAPH.

French Student Exchange Program

Bondues – The White Cross College
Nantes – The Sacred Heart College

NAME:	
ADDRESS:	
DATE OF BIRTH:	PLACE OF BIRTH:
RELIGION:	CITIZENSHIP:
TELEPHONE:	
PARENTS / LEGAL GUARDIANS	
FATHER'S NAME:	MOTHER'S NAME:
ADDRESS:	ADDRESS:
OCCUPATION:	OCCUPATION:
TELEPHONE: (H)	TELEPHONE: (H)
TELEPHONE: (B)	TELEPHONE: (B)
MOBILE:	MOBILE:
EMAIL:	EMAIL:
BROTHERS & SISTERS	
NAME	AGE

DO YOU HAVE ANY HOUSEHOLD PETS:

FORM 2

STUDENT'S MEDICAL HISTORY					
NAME:			DATE:		
GENERAL HEALTH:		EXCELLENT <input type="checkbox"/>	GOOD <input type="checkbox"/>	POOR <input type="checkbox"/>	
DOCTOR'S NAME:			TELEPHONE NO:		
MEDICARE NO:			DATE OF LAST TETANUS BOOSTER:		
DO YOU WEAR GLASSES OR CONTACT LENSES:					
HAVE YOU EVER SUFFERED FROM ANY OF THE FOLLOWING:					
<input type="checkbox"/> ASTHMA	<input type="checkbox"/> BRONCHITIS		<input type="checkbox"/> CONVULSIONS		
<input type="checkbox"/> DIABETES	<input type="checkbox"/> MIGRAINE HEADACHES		<input type="checkbox"/> EPILEPSY		
<input type="checkbox"/> ARTHRITIS	<input type="checkbox"/> NOSE BLEEDS		<input type="checkbox"/> HEART DISEASE		
<input type="checkbox"/> EAR INFECTIONS	<input type="checkbox"/> KIDNEY DISEASE				
OTHER PLEASE SPECIFY:					
GIVE DETAILS OF USUAL TREATMENT SHOULD THE INDICATED CONDITION(S) OCCUR:					
ANY OTHER CHRONIC CONDITIONS, RECENT ILLNESS OR SURGERY:					
PLEASE LIST ALL KNOWN ALLERGIES (FOOD, MEDICATIONS, INSECTS ETC) AND THE USUAL MEDICATIONS FOR THESE ALLERGIES:					
ALLERGIES			MEDICATION		
IS THE APPLICANT CURRENTLY TAKING ANY MEDICINE?					
MEDICATION:		ILLNESS / CONDITION:		DOSAGE / FREQUENCY:	

FORM 3

APPLICANT'S CO CURRICULAR ACTIVITIES

SPORTING ACTIVITIES (2013 – 2019)

1		4	
2		5	
3		6	

CULTURAL ACTIVITIES (2013 – 2019)

1		4	
2		5	
3		6	

SERVICE ACTIVITIES (2013 – 2019)

1		4	
2		5	
3		6	

OTHER ACHIEVEMENTS

1	
2	
3	
4	
5	

FORM 4

PERSONAL SECTION

On a separate sheet, write a minimum of 200 words on why you have applied for this exchange. In your written piece, you must address the following points:

- How the Exchange will benefit you personally.
- What you hope to learn during the six weeks.
- What fears or concerns you have about the Exchange.
- How the College will benefit from sending you to The White Cross College / The Sacred Heart College.

SCHOOL REPORTS

Please submit copies of your Year 10 Reports (End Semester 1 and 2).

PERSONAL REFERENCES

- Please attach to your application no more than two (2) written references from personal referees (not school personnel/staff).
- Please use the form attached to request a reference from your House Dean. This needs to be submitted separately by your House Dean. Make sure you follow up with your House Dean to ensure this is done to complete your application.

Note : The two personal references must be attached to your application when you hand it in.

FORM 5

NAME OF APPLICANT:

I wish to apply for the following Student Exchange: **(Please indicate a preference.)**

1. French Exchange – The White Cross College
2. French Exchange – The Sacred Heart College

I understand that this application assumes my continued study of French in Year 12.

SIGNATURE OF APPLICANT

DATE

Parental Approval

I / We the undersigned support our son, _____'s application for the French Student Exchange program. We understand that all costs related to the exchange will be funded by us. We confirm that our son has a current passport *with an expiration date **not prior to July 2020*** **OR** we undertake that a passport application/renewal will be lodged for our son immediately he is chosen to participate.

Parent / Guardian: _____ Date: _____

Parent / Guardian: _____ Date: _____

FORM 6

LIST OF DOCUMENTS

Please check that you have:

- Attached a recent colour passport photograph to the front of the application
- Attached your written piece on why you are applying for the Exchange
- Attached your Year 10 Reports
- Attached two personal written references
- Requested a reference from your House Dean
- If you have a current passport, have attached a copy of the identification page

Check you have completed each of the following sections:

- Form 1 Student Details
- Form 2 Student's Medical History
- Form 3 Co-Curricular Activities and Interests
- Form 4 Personal Section
- Form 5 Choice of School and Parental Approval

Please give this to your House Dean for completion.

House Dean's Reference –International Exchange Program 2019

Candidate: _____ Tutor Group: _____

Please complete the following form indicating on each continuum where you believe the candidate sits for the relevant attribute. This form is confidential and will not be shown to the candidate. The two areas of interest that you are asked to consider are the candidate's

- **Personal attributes** and **Community attributes**

PERSONAL

Reliability:

Excellent				Reasonable					Poor
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Behaviour:

Excellent				Reasonable					Poor
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Manners:

Excellent				Reasonable					Poor
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Initiative:

Excellent				Reasonable					Poor
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Attitude to Studies:

Excellent				Reasonable					Poor
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Academic Results:

Excellent				Reasonable					Poor
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Behaviour:

Excellent				Reasonable					Poor
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Work Ethic:

Excellent				Reasonable					Poor
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Rapport with Peers:

Excellent				Reasonable					Poor
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Rapport with Staff:

Excellent				Reasonable					Poor
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COMMUNITY

Involvement in
House Activities:

Excellent			Reasonable			Poor
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Involvement in
Service Programmes:

Excellent			Reasonable			Poor
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Involvement in
Co-curricular:

Excellent			Reasonable			Poor
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Ability to form
relationships quickly & easily:

Excellent			Reasonable			Poor
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Ability to cope
with difficult circumstances:

Excellent			Reasonable			Poor
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Ability to cope
with change:

Excellent			Reasonable			Poor
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RECOMMENDATION

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

Highly Recommended

Recommended

Do not recommend

ADDITIONAL COMMENTS
