



# SCOTTSDALE SISTER CITIES ASSOCIATION

## Youth Ambassador Application for Kingston, Ontario, Canada

Applications Due by September 10, 2025. Applicants will be acknowledged and notified by e-mail of acceptance and orientation date. Email completed application to: [suzanaustin@cox.net](mailto:suzanaustin@cox.net)

Please type or print neatly in dark ink only.

Legal Name \_\_\_\_\_  
First Middle Last Nickname - if used

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

E-Mail Address \_\_\_\_\_ Cell Phone \_\_\_\_\_

Gender \_\_\_\_\_ Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Current Grade Level \_\_\_\_\_

School \_\_\_\_\_ Approximate GPA \_\_\_\_\_ Do you have a valid passport? \_\_\_\_\_

Foreign languages studied and how long for each \_\_\_\_\_  
\_\_\_\_\_

Country of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

List school/community activities in which you participate \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies/sports \_\_\_\_\_

Work Experience \_\_\_\_\_

Why would you like to be part of this program? \_\_\_\_\_  
\_\_\_\_\_

What are your plans for the future (education and career)? \_\_\_\_\_  
\_\_\_\_\_

Briefly describe yourself: \_\_\_\_\_  
\_\_\_\_\_

Parents' full names \_\_\_\_\_  
(Or guardians, both if in household) First Middle Last

Father Cell # \_\_\_\_\_ Email: \_\_\_\_\_

Occupation, place of employment: \_\_\_\_\_

Mother Cell # \_\_\_\_\_ Email: \_\_\_\_\_

Occupation, place of employment: \_\_\_\_\_

# Siblings in your home now \_\_\_\_\_ # and types of pets \_\_\_\_\_  
\_\_\_\_\_

Have you traveled abroad? \_\_\_\_\_ If so, where and dates of stay \_\_\_\_\_

Have you ever traveled or been at camps without your family? \_\_\_\_\_ If yes, explain \_\_\_\_\_

As a representative of Scottsdale, what would you share about your city with others? \_\_\_\_\_

Are you taking any medications? List \_\_\_\_\_

Any food restrictions or allergies? \_\_\_\_\_

Is there anything a host family should know about your health, level of activity, etc? Please explain:

Will you and your family be willing to host your overseas host sibling in your home? \_\_\_\_\_

**CAREFULLY READ** the following statement before signing.

I understand that if chosen, I must abide by all rules of the exchange and will sign the code of conduct requirements. I also understand and will fulfill the following requirements if selected:

Requirements:

- ✓ Join SSCA -- Family Membership \$60
- ✓ Attend all preparatory sessions before leaving on trip
- ✓ Purchase an SSCA T-shirt \$15.00
- ✓ Be willing to speak to SSCA Board and School Board about experience upon return.

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

\_\_\_\_\_  
Date

My son/daughter has my permission to apply for and participate in the exchange program with the Scottsdale Sister Cities Association. We also will be able to host a return exchange youth ambassador and will follow all guidelines.

\_\_\_\_\_  
Signature of Parent and/or Guardian

\_\_\_\_\_  
Date

List two teachers for reference who have known you for at least one year:

1. \_\_\_\_\_ email \_\_\_\_\_

2. \_\_\_\_\_ email \_\_\_\_\_

For questions, please contact Suzie Austin  
Kingston Committee Co-Chair at [suzanaustin@cox.net](mailto:suzanaustin@cox.net)