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| chf_logo_gold | **CHF EXCHANGE TEACHER APPLICATION** ***Cordell Hull Foundation for International Education*** 45 Rockefeller Plaza, Floor 20, New York, NY 10111 Website:  www.cordellhull.org     Telephone: 646-289-8620      **email:** [**pro@cordellhull.org**](mailto:pro@cordellhull.org)Fax: 646.349.3455 |

**Complete this application in English.**

# INSERT SMALL PHOTO HERE

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| **PERSONAL INFORMATION** | |
| **Name of school where hired in USA** | **State where hired** |
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| **Last Name** | **First Name** | | **Middle Name** |
|  |  | |  |
| **Gender** | **Date of Birth - Month spelled out – Day - Year** | | **City of Birth** |
| Male  Female |  | |  |
| **Country of Birth** | | **Citizen of** | **Legal resident of** |
|  | |  |  |

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| **Address in Home Country**  **Street and number:** | | **City:** |
| **Country:** | **Zip Code – DO NOT LEAVE OUT:** |  |

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| **Home Phone** | | **Work Phone (include city and country code)** | | | | | | | | **Skype no.** |
| **Email address** | | | | | | **Address in the U.S. (if applicable)** | | | | |
| **Marital Status** | | **Years Married** | | | | | | | | **Religion** |
| **FAMILY INFORMATION**  : **4 MAXIMUM** | | | | | | | | | | |
| **Total number of family members to accompany you to the U.S. (spouse & children only):** | | | | | | | | | | |
| **Family Member # 1** | | | | | | | | | | |
| **Name of family member** | | | | **Relationship** | | | | | | |
| **Date of Birth** | **City of Birth** | | | | | | **Country of Birth** | | | |
| **Family Member # 2** | | | | | | | | | | |
| **Name of family member** | | | | **Relationship** | | | | | | |
| **Date of Birth** | **City of Birth** | | | | | | **Country of Birth** | | | |
| **Family Member # 3** | | | | | | | | | | |
| **Name of family member** | | | | **Relationship** | | | | | | |
| **Date of Birth** | **City of Birth** | | | | | | **Country of Birth** | | | |
| **EMERGENCY CONTACT** | | | | | | | | | | |
| **Relative to contact in case of emergency** | | | | | **Relationship** | | | | | |
|  | | | | |  | | | | | |
| **Email address of emergency contact** | | | | | **Phone (include city and country code)** | | | | | |
|  | | | | |  | | | | | |
| **Mailing address of emergency contact**: | | | | | | | | | | |  |
| **EDUCATIONAL BACKGROUND INFORMATION (Add additional rows if necessary)** | | | | | | | | | | |
| **Beginning with university until now, please supply the following information:** | | | | | | | | | | |
| **Education Information # 1** | | | | | | | | | | |
| **Name and address of Institution** | | | | | | | | **City, State and Country** | | |
| **Name of Degree/Diploma including subject of expertise** | | | | | | | | **Year Completed** | | |
| **Education Information # 2** | | | | | | | | | | |
| **Name and address of Institution** | | | | | | | | **City, State and Country** | | |
| **Name of Degree/Diploma including subject of expertise** | | | | | | | | **Year Completed** | | |
| **Education Information # 3** | | | | | | | | | | |
| **Name and address of Institution** | | | | | | | | | **City, State and Country** | |
| **Name of Degree/Diploma including subject of expertise** | | | | | | | | | **Year of Completion** | |
| **TEACHER CERTIFICATIONS, EXAMS OR COMPETITIONS** | | | | | | | | | | |
| **List any teaching certifications or other exams you have completed. Spell out the name of the certification and describe what job(s) it specifically authorizes you to perform in your home country.** | | | | | | | | | | |
| **EXTRACURRICULAR ACTIVITIES** | | | | | | | | | | |
| **Sports** | | |  | | | | | | | |
| **Awards** | | |  | | | | | | | |
| **Other hobbies and interests** | | |  | | | | | | | |

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| **REFERENCES** | |
| **List the following information of two former supervisors or principals who can comment on your professional skills, character and dependability. Do not list relatives, friends or fellow teachers.** | |
| **Reference # 1 : former supervisor or principal – no relatives, friends or teaching colleagues** | |
| **Name and Position** | **Contact Address** |
| **Telephone (include city and country code)** | **Email Address** |
| **Relation to You (i.e. principal, supervisor)** | |

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| **Reference # 2 : former supervisor or may be from a teaching colleague (for the second reference)** | |
| **Name and Position** | **Contact Address** |
| **Telephone (include city and country code)** | **Email Address** |
| **Relation to You (i.e. principal, supervisor)** | |
| **RELEVANT TEACHING EXPERIENCE (Add rows if necessary please)** | |

**Total number of years of teaching experience:**

|  |
| --- |
| **Teaching Experience # 1** |
| **Name and address of Institution**   |  |  | | --- | --- | | **Type of Institution**  Public    Private | **Location (specify city and country)** |  |  |  |  | | --- | --- | --- | | **Inclusive Dates: From** | **To** | **No. of years** |  |  |  |  | | --- | --- | --- | | **Employment Status** | **Student Ages** | **Avg. no. students per class** | | **Subjects** | | **Grades** | |

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| **Teaching Experience # 2** |
| **Name and address of Institution**   |  |  | | --- | --- | | **Type of Institution**  Public    Private | **Location (specify city and country)** |  |  |  |  | | --- | --- | --- | | **Inclusive Dates: From** | **To** | **No. of years** |  |  |  |  | | --- | --- | --- | | **Employment Status** | **Student Ages** | **Avg. no. students per class** | | **Subjects** | | **Grades** | |

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| **Teaching Experience # 3** |
| **Name and address of Institution** |
| |  |  |  | | --- | --- | --- | | **Type of Institution**  Public    Private | **Location (specify city and country)** | | | **Inclusive Dates: From** | **To** | **No. of years** | | **Employment Status** | **Student Ages** | **Avg. no. students per class** | | **Subjects** | **Grades** |  | | **Have you ever held any other visa status to work or live in the United States?**     Yes  No  **If so, state type of visa (alphabet letter, i.e. E, F, J, etc.) plus number (i.e. J-1), effective dates, and reason.**  **Add lines if necessary.** | | | |

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| PRIOR VISAS | | | |
| Letter and number | Reason: Work or Travel | U.S. State | Dates |
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| **LANGUAGE AND OTHER INFORMATION** | | | |

Specify your native language:      
Language Proficiency (specify level of proficiency – Excellent/Good/Fair)

|  |  |  |  |
| --- | --- | --- | --- |
| **Foreign Language** | **Speak** | **Read** | **Write** |
|  | Excellent  Good  Fair  None | Excellent  Good  Fair  None | Excellent  Good  Fair  None |
|  | Excellent  Good  Fair  None | Excellent  Good  Fair  None | Excellent  Good  Fair  None |
|  | Excellent  Good  Fair  None | Excellent  Good  Fair  None | Excellent  Good  Fair  None |

Have you ever lived or traveled outside your native country:     Yes  No   
If yes, please provide details below. If you cannot provide dates, fill in the other blanks. Add rows if necessary.

| **Countries** | **Dates** | **Reason** |
| --- | --- | --- |
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Specify subjects you can teach: Spanish, French, German, Math, Science or others   
Have you ever been convicted of a crime?     Yes  No   
  
Describe any health problems, chronic (ongoing) illness or disabilities from which you or any accompanying family member suffer (answer NONE if none apply):      **Caution: Do not leave this question blank.**

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| **BRIEF ESSAY QUESTIONS** |

According to the Cordell Hull Foundation website, name two the two (2) greatest achievements that Cordell Hull, the distinguished American statesman, obtained. To answer, read the Cordell Hull Bio ON OUR WEBSITE: [www.cordellhull.org](http://www.cordellhull.org) - Click on the link on the left side of the page: About Us / then click on: Hull Biography … <http://www.cordellhull.org/english/About_Us/Biography.asp>

**You will only find the answer easily on the Cordell Hull Foundation website. If you miss the question, we have to write and ask you to answer it again. Please follow the instructions and look on OUR website.**  
1)     
2)  

How will your participation in the Cordell Hull Foundation Foreign Exchange Teacher Program benefit the following:  
1) You – 250 character minimum  
  
2) Host School - 250 character minimum  
  
3) Host Community - 250 character minimum  
  
  
In your opinion, what personal characteristics or qualities of yours are important in order to be an   
effective and successful Exchange Visitor to the U.S.? - 250 character minimum  
  
  
What motivates you to teach in the U.S. and to participate in the CHF Teacher Exchange Program?  
- 250 character minimum  
  
  
What is your approach to teaching a foreign language or subject of expertise to groups of 20-30 students?  
- 250 character minimum  
  
  
Why is this cross-cultural experience important to you? Cite two reasons. - 250 character minimum each reason

1)

2)

Through this exchange, describe how you would help reduce or eliminate many cultural stereotypes and generalizations held by U.S. citizens about foreign nationals, and vice versa, after you return to your native country?  
- 250 character minimum

DON’T FORGET TO READ THE MEMO OF UNDERSTANDING ON THE LAST TWO PAGES, SIGN IT, AND SEND BACK BOTH PAGES, EITHER BY SCAN OR FAX. SEE INSTRUCTIONS BELOW.

### Additional items required: (1) Insert one small or passport-size photo into this application form on p. 1

(then send to [pro@cordellhull.org](mailto:pro@cordellhull.org) as an email attachment).

Scan and send to [pro@cordellhull.org](mailto:pro@cordellhull.org):

(2) Signed copy of the following MOU certifying understanding of J-1 visa rules.

(3) Good, legible copies of name pages of passports of J-1 teacher and all immediate-family dependents who will be living in the U.S. with the teacher.

Email the completed application to: [pro@cordellhull.org](mailto:pro@cordellhull.org)

You may also FAX Items (2) and (3) above to: 646-349-3455

THE CORDELL HULL FOUNDATION

*for International Education*

45 Rockefeller Plaza, Floor 20 New York, NY 10111

Telephone: 646.289.8620 Fax:  646/ 349.3455

Website: www.cordellhull.org email: pro@cordellhull.org

**MEMO OF UNDERSTANDING**

**BY CHF APPLICANT FOR J-1 VISA EXCHANGE VISITOR SPONSORSHIP**

**By signing this memo, I attest that I understand the following conditions applicable to me as a J-1 visaholder:**

1. TWO-YEAR HOME-COUNTRY PHYSICAL PRESENCE REQUIREMENT

Section 212(e) of the Immigration and Nationality Act and PL 94-484, as amended.

Exchange Visitor Teachers who possess a skill that is in short supply in their home country will be subject to the two-year home-country residence requirement. This means that I may be required to reside in my home country for the two years following completion of my J-1 visa term before I am eligible for immigrant status, temporary worker *(H)* status or intracompany transferee *(L)* status, if teaching is on the Exchange Visitor Skills list or if my stay is financed in any part by my native country.

1. HEALTH INSURANCE: Exchange visitors are required to have medical insurance in effect for themselves and any accompanying spouse and minor children on J visas for the duration of their exchange program. At a minimum, my health insurance coverage shall include: (1) medical benefits of at least U.S. $100,000 per person per accident or illness; (2) repatriation of remains (return of body in event of death) in the amount of U.S. $25,000; and (3) expenses associated with medical evacuation in the amount of U.S. $50,000. My health insurance policy shall not have a deductible that exceeds U.S. $500 per accident or illness. I understand that my health insurance must be effective as of the day that I set foot on U.S. soil.
2. I understand that the Exchange Visitor Program regulations, 22 CFR Part 62.14, require that I understand and execute the necessary steps to obtain J-1 visa approval in my home country. If granted a J-1 visa, I agree to abide by these regulations and CHF's Exchange Visitor Program rules and mission.
3. CHF and the host school / district reserve the right to revoke or terminate my J-1 visa program. Grounds for such action include, but are not limited to, the following: violation of the laws of the United States, misconduct, unsatisfactory performance as a teacher, failure to complete the teaching position because of voluntary termination—including premature departure, engaging in unauthorized income-producing activities, lack of funding, insubordination, refusal to execute all required CHF application documents, lack of cooperation and/or refusal to accept remedial assistance offered by the school or CHF, marriage to an American citizen, or other activities that in the judgment of CHF and/or the host school or district are inconsistent with the purposes and best interests of the J-1 Exchange Visitor Cultural Exchange Program.
4. NON-TRANSFERABILITY. I understand that my J-1 visa is linked to the school to which I was invited to work; that I may not transfer to another school for the second to fifth years possible in J-1 visa status. If I work for a public school district, it is up to the discretion of the supervisor to place me, and may change from one year to another.
5. INCOME TAX DEDUCTIONS:   
   I understand that some foreign countries—but not all—have tax treaties with the United States. Such a treaty might exempt a J-1 visaholder from U.S. income taxes.  I agree to (1) prepare all necessary documents to obtain any tax refund due me, if applicable, and to (2) pay all my income tax obligations in my home country and the U.S. according to regulations of both countries.  I understand that the host school is not obligated to exempt taxes on my behalf. I understand that ignorance of the law does not exempt me from following the necessary regulations, and accept responsibility to research and know.
6. I hereby agree to obtain a credit card in my home country with at minimum of $3,500 credit prior to leaving my employment. This card must be valid to use in the United States to help set up residency and purchase personal items during my first six months.  I understand that the requirements for me to qualify for a US credit card could be up to six months’ residency.
7. I hereby agree to attend a one-day Cordell Hull Foundation J-1 Exchange Visitor Orientation prior to or during the first months of my exchange teacher program. I understand that it is my responsibility to book a flight to arrive in time to attend the scheduled workshop for my particular program, whether in New York City or in the city where I will teach. In the event travel costs must be incurred to attend, I will be responsible for related expenses if my school does not cover transportation, lodging, etc. I also understand that this orientation may be scheduled on a Saturday or evening, and that attendance is part of my obligation as a J-1 exchange visitor visaholder. Sponsors are required by law to offer these workshops which are an integral part of the Exchange Visitor Program.

**Signed: Date:**

**PRINT or TYPE:**

**FIRST NAME MIDDLE NAME LAST NAME**

**Address in home country:**

**Telephone no. in home country:**

**email address:**

**bd15034_**

**I have read, understood and signed this form.**

**I agree to sign and scan this form and send as an email to** [**pro@cordellhull.org**](mailto:pro@cordellhull.org)**, or**

**fax this form to the Cordell Hull Foundation for International Education at: 646-349-3455**