

## FARMSTAY in France

Duration

## **Application Form**

Starting date

Last name :									
First name :									
Postal adres	ss:							Ple	ase attach one
Postal/Zip Code : Town :						sm	iling passport		
Country :							size	e picture here	
Phone n° (+	area code) :								
Fax n° (+ area code) :									
E-mail adress :									
Passport n°:									
Country of is	ssue :								
Expiry date :									
Sex: ○ M	Sex: ○ M ○ F			Date	Date of birth :				
Nationality :				Nativ	e language	e:			
NEXT UE KI	N (Emergeno	ry Contact P	Parcon)						
	with volunte	-							
Name :			•						
Postal Adres	SS:								
Post/Zip Code : Town :					Country			<u> </u>	
Phone n° (+area code) :				E-mail address :					
FRENCH SKI	LLS								
Written :	O Beginner	O Pre-intern	nediate O I	Intermedia	ate O Uppe	er-intern	nediate O	Advanced	O Fluent/Native
Cnokon .									
Spoken :	ars have you st			intermedi	ate O uppe	er-intern	iediate O	Advanced	O Fluent/Native
now many ye	ars mave you so	luuleu i lellell	•						
EDUCATION									
EDUCATION  Bloom list and	ademic course	work rolated to	agricultura	/touriem t	hat you hav	o compl	otod :		
r icase iist ace	aucillic course	WOIK ICIAIGU II	agriculture	/ tourisiir i	nat you nav	e compi	eteu .		
Do vou have a	any driving lice	nce ? O trac	tor O ca	r O	other :				
	cept an invitati			O Ye		0 (	Only with ch	nildren	
Would you accept an invitation from a single woman ? ○ Yes ○ No ○ Only with children									
Hobbies & ma	in interests :	0)			2)			4)	
1)		2)			3)			4)	

MEDICAL INFORMATION						
Do you smoke ? • Yes • No						
Are you a vegeterian ? • Yes • No						
Do you have any special dietary requirements ? O Yes O No If yes, please specify :						
Are you allergic to anything ? O Yes O No If yes, please specify :						
Tick the appropriate circle if you are presently suffering from or have ever had :						
<ul> <li>○ Tuberculosis</li> <li>○ Anemia</li> <li>○ Eye problems</li> <li>○ Epilepsy / convulsions</li> <li>○ Bulimia</li> <li>○ Alcohol / drug problems</li> <li>○ Diabetes</li> <li>○ Depression</li> <li>○ Dizziness / fainting</li> <li>○ Kidney disease</li> <li>○ Migraine / headaches</li> <li>○ Heart disease</li> <li>If you ticked any of the above, please give details and dates :</li> </ul>						
Have you suffered from eating disorder (anorexia/bulimia) ? ○ Yes ○ No If yes, please specify :						
Have you suffered from a nervous breakdown, depression or mental disorders ?  O Yes O No If yes, please specify:						
Have you undergone surgery or been hospitalized ? O Yes O No If yes, please specify (+dates) :						
Do you have any physical disabilities ? O Yes O No If yes, please specify :						
Do you carry an infectious disease such as Hepatitis B or HIV ? O Yes O No If yes, please specify :						
Are you currently taking any medication ? ○ Yes ○ No If yes, please specify :						
PRACTICAL EXPERIENCE IN AG	RICULTURE					
Picking berries / fruit	O much	O some	O little	○ none		
Harvesting vegetables	O much	○ some	O little	O none		
Driving the tractor	O much	○ some	○ little	O none		
Caring for farm animals	O much	○ some	O little	O none		
Which farm animals ?	O sheep	○ pig	O horse	O goat O	cows/beef	O cows/milk
Milking	O much	O some	O little	O none		

O little

O little

○ little

O none

O none

O none

O some

 $\quad \bigcirc \text{ some }$ 

○ some

O much

O much

O much

Horticultural work

Forestry work

Other :

MOTIVATION
Why would you like to experience life on a French farm ?
What do you expect life on a French farm to be like ?
What do you hope to gain from this experience ?
what do you hope to gain from this experience ?
Have you lived away from home or traveled abroad before ? If yes, please give details.
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Each Farm Experience programme will be different and the success of it will depend primarily on the participant's attitude and willingness to adapt to different environments. The student will help on the farm for +/- 25 hours/week in exchange for food and board. Farm work is hard and can be dirty and unpleasant. The student may be required to help outdoors in any weather and/or to help with household chores. At times farm accommodation can be quite simple. The farmer reserves the right to ask the participant to leave the farm if he/she cannot perform as required. Participants must follow the rules of the farm when they are there. They should use the French language to communicate.

WEP provides a coordinator for the student whose job is to find a farm for the student and is available at any time to answer questions about the programme as well as provide support.

WEP is not liable for anything that happens to the student while they are on the farm. WEP arranges farm placements but the farms are not related to WEP in any way.

No participants will be accepted by WEP without insurance covering sickness, accidents, repatriation and third part liability. The host family and WEP cannot be liable for any cost resulting from participant's illness, personal liability or other risks.

If the student is unhappy with their farm experience they need to speak to their coordinator or WEP. We need to have feedback from the students about the farms for future Farmstay placements.

I understand and agree with the above conditions.

I declare that the above information submitted by me is complete and accurate. I further realize that any false declaration by me would render any claim whatsoever void and I could further be liable for prosecution by the laws governing France.

Signature of Participant :	Date :