

FARMSTAY in Belgium

Duration

Application Form

Starting date

Last name :							
First name :							
Postal adres		Please attach one					
Postal/Zip C	ode :	To	own:		smiling passport		
Country :		1			size picture here		
Phone n° (+	area code) :						
Fax n° (+ are	ea code) :						
E-mail adres	SS:						
Passport n°	:						
Country of is	ssue :						
Expiry date :							
Sex: O M	0 F	D	ate of birth :				
Nationality :		N	ative language :				
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	N (Emergency Contact with volunteer (e.g. fath						
Name :	, William 10. a						
Postal Adres	as:						
Post/Zip Cod		Town:		Country :			
Phone n° (+a		•••••	E-mail address				
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FRENCH SKII	LLS						
Written :	O Beginner O Pre-inter	madiate () Interm	ediate () Unner-inte	rmediate () Ad	vanced O Fluent/Native		
Willich .	-						
Spoken :	O Beginner O Pre-inter		ediate O Upper-inte	rmediate O Ad	vanced O Fluent/Native		
How many yea	ars have you studied French	1?					
EDUCATION							
Please list academic coursework related to agriculture/tourism that you have completed :							
D			O - M				
	nny driving licence? O tra		O other :	Only with childr	en		
Would you accept an invitation from a single man? O Yes O No O Only with children Would you accept an invitation from a single woman? O Yes O No O Only with children							
Hobbies & ma		J		,	-		
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 :									
 ○ Tuberculosis ○ Anemia ○ Eye problems ○ Anorexia ○ Hepatitis A B C ○ Alcohol / drug problems ○ Diabetes ○ Depression ○ Dizziness / fainting ○ Kidney disease ○ Migraine / headaches If you ticked any of the above, please give details and dates : 									
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 ? ○ Yes ○ 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 AGRICULTURE									
Picking berries / fruit	O much	○ some	○ little	O none					
Harvesting vegetables	O much	O some	O little	O none					
Driving the tractor	O much	O some	O little	O none					
Caring for farm animals	O much	O some	O little	O none					
Which farm animals ?	○ sheep	○ pig	O horse	○ goat	O cows/beef	O cows/milk			
Milking	O much	O some	O little	O none					

Horticultural work

Forestry work

Other :

O much

O much

O much

○ some

O some

○ some

O little

O little

O little

O none

O none

O none

MOTIVATION
Why would you like to experience life on a Belgian farm ?
What do you expect life on a Belgian farm to be like ?
What do you hope to gain from this experience ?
Have you lived away from home or traveled abroad before ? If yes, please give details.

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 Belgium.

Signature of Participant :	Date :
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