

600 3rd Ave Fl 34 New York, NY 10004 (212) 338-6860 Tel (212) 338-6864 Fax www.americanaustralian.org

AU/NZ 12-Month Student Work & Travel Program

Application for Student and Exchange Visitor Program Sponsorship Attach Passport Photograph Here

Expected dates of Student Work Travel:	TO:			
Expected dates of Student Work Travel:	Month / Day / Year	Month / Day / Year		
In what country do you intend to apply for you (Application in your country of citizenship is often require		?		
BIOGRAPHIC DATA				
Mr. / Ms. Circle One Last name	First name	Middle names		
Permanent Home Address (should be address	outside the United States) in hon	ne country of legal residence		
Street		Apt No		
	Country	Apt No Postal Code		
City State	•	Postal Code Valid Until		
City State Current Mailing Address for Receiving Associ	•	Postal Code		
City State Current Mailing Address for Receiving Associations Street	•	Postal Code Valid Until		
City State Current Mailing Address for Receiving Associative Street City State	iation Documents (No PO Boxes) Country	Postal Code Walid Until		
Current Mailing Address for Receiving Associ	Country Current Fax No:	Postal Code Valid Until		

Monu	Date of Birth:		Country of Birth:		
Country of Legal Residence:					
Emergency Contact Person:		w. 1			
Name:		Relationship:	Relationship:		
Contact Number:		Contact Email:	Contact Email:		
EDUCATION					
Are you currently enrolled as a student? () Yes () No					
If Yes – please complete below and attached proof of enrollment to application:					
Name and Location of Educational Facility	Start and End Dates Study (Month / Yea	• • • • • • • • • • • • • • • • • • • •	Degree or Certificate Name		
If No, please complete below a	and attach proof of gradua	ation and academic transcript:			
Name and Location of Educational Facility	Graduation Date (Month / Day / Yea	• • • • • • • • • • • • • • • • • • • •	udy Degree or Certificate Name		
PRIOR WORK EXPERIENC	CE.				
PRIOR WORK EXPERIENCE (Last 3 years –start with the mo		ards)			
		ards) Start and End Dates (Month / Year)	Job Title or Position		
(Last 3 years –start with the mo		Start and End Dates	Job Title or Position		
(Last 3 years –start with the mo		Start and End Dates	Job Title or Position		
		ards)			

Please attach an additional sheet if necessary.

PROSPECTIVE US EMPLOYER DETAILS

	we you already lined up employment in the United Yes, please complete the following:	d States? () Yes () No
Naı	me of Prospective Employer:	
Ado	dress of Prospective Employer:	
Naı	me and Title of Contact:	
Coı	ntact's Number:	Email:
	Please note that you have 10 days after your arrier visa conditions that the AAA is notified of new	ival date in the US to find your own employment. It is a requirement of employer details within this time period.
	ase describe any source of income or financial sup ome provided to you by your prospective employe	pport you can rely upon to cover your expenses that may exceed the er:
US	VISA INFORMATION	
1)	Have you previously visited the United States or If yes, provide the name of the sponsor(s), progr month and year), and reason for leaving:	n a J-1 visa?() No() Yes ram number(s), purpose of visit and dates of entry and exit (include both
2)	Are you currently in, or have you in the last twe If yes, please complete:	elve months visited, the United States? () No () Yes
	Type of Visa Held:	Purpose of Visit:
	Date of Entry:	Expiration Date of I-94 Card:
	Date you actually exited the United States: States, you must attach a photocopy of your I-94 consider this application until this material is pro-	(If you are currently in the United 4 card, both front and back. Do not send the original. We will not ovided.)
3)		prized visa to enter the United States? () No () Yes e of Visa:
4)	Have you ever been refused a visa to enter the U If Yes, provide the following information: Type	United States? () No () Yes of Visa: Date of Refusal: Month / Day / Year
	Date of most recent entry to United States subse Type of Visa:	equent to Visa Refusal:

5)	Have you ever been convicted of a crime? (If Yes, please list details:) No () Yes
OT	HER		
Wh	at do you expect to learn from the exchange?		
Hov	v did you learn about the Association:		
I ce	rtify that I meet the program eligibility and ha	ve truthf	fully completed this application.
Sig	nature		Date: