

NOTE: Documentation must specifically reflect full-time status or a minimum of eight credit hours and the current academic period. You must begin each program within one semester of the period of study denoted on the proof of student status which you submit.

3. Two 1 1/2" x 2" photos (passport size) signed on back for identification. Submit two photos for each program.
4. The completed Work Abroad Reference Form, a reference letter from a college instructor or recent employer, or written offer of employment from a prospective employer.
5. Proof of language ability (France and Costa Rica only). Photocopy of an official course transcript underlining language courses through the intermediate level (at least two years) or an official letter from your most recent language instructor

attesting to your language skills, or a letter from a college professor describing your language ability if acquired outside of school. Language ability requirements may be waived only if a written offer of employment is included with the application. (Germany: A special language reference form is required. CIEE will send this to all Work in Germany applicants, or call to get one.)

6. Proof of adequate medical insurance (Germany, Canada and Costa Rica only). A copy of your International Student Identity Card which provides insurance (see center section) or a photocopy of current policy which specifically states that it provides coverage outside the continental U.S.
7. Certified check or money order payable to CIEE for \$125.

## Work Abroad Timetable

Britain	Any time of the year for up to 6 months
Ireland	Any time of the year for up to 4 months
France	Any time of the year for up to 3 months
Germany	From May 15 to October 15 for up to 3 months
New Zealand	From April 1 to October 31
Costa Rica	From June 1 to October 1
Canada	From May 1 to October 31
Jamaica	From December 15 to April 1 or From June 1 to October 1

## Work Abroad Program Application

### Work Abroad College/University Declaration

Name of Applicant \_\_\_\_\_

Name of School \_\_\_\_\_

I hereby certify that the applicant is a full-time student at the above-named institution during the **1992-93** academic year and is pursuing coursework leading to a diploma or a degree.

Registrar's Signature \_\_\_\_\_

Date \_\_\_\_\_

School Seal \_\_\_\_\_

I hereby certify that the applicant is a full-time student at the above-named institution during the **1993-94** academic year and is pursuing coursework leading to a diploma or a degree.

Registrar's Signature \_\_\_\_\_

Date \_\_\_\_\_

School Seal \_\_\_\_\_

### Work Abroad Reference

To be completed by former employer or current college instructor or counselor.

Name of applicant for CIEE's Work Abroad program \_\_\_\_\_

Applicant is applying for Work Abroad in:

- Britain     Canada     Costa Rica     France  
 Germany     Ireland     Jamaica     New Zealand

How long have you known the applicant? \_\_\_\_\_  
And in what capacity? \_\_\_\_\_

### Please evaluate the applicant as to:

	Excellent	Good	Fair	Poor
Ability to get along with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to accept supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to adapt to new situations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Ms./Mr. \_\_\_\_\_

Telephone \_\_\_\_\_

Title \_\_\_\_\_

Institution or Company Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

### Please complete both sides

Return application to:  
CIEE, Work Abroad  
205 East 42nd Street  
New York, NY 10017

All application materials must be submitted together.  
Questions? Call Work Abroad at (212) 661-1414, ext. 1130.