



**CISV USA**  
Building global friendship

**CISV** international people's project

## International People's Project (IPP) Application Form

Please return the completed form and 2 recommendation letters to [taniacardona12@gmail.com](mailto:taniacardona12@gmail.com) by January 1.

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender  
Identity: \_\_\_\_\_

Occupation: \_\_\_\_\_

IPPs applying for: \_\_\_\_\_

**Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Home Telephone**

**Mobile Telephone**

**E-mail Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CISV Membership** (if selected applicant is not a chapter member, they will be required to join the nearest chapter, or join CISV USA)

Are you a member of a CISV Chapter?  No  Yes

If Yes, which Chapter: \_\_\_\_\_

**Please answer the questions below:**

**1. I have attended a CISV activity before**

No:  Yes:  → If yes, which ones?

**2. I study/work/have dealt with issues related to the theme of the IPP I am applying for:**

No:  Yes:  → If yes, in what way?

**3. Present professional occupation:**

**4. Previous relevant experiences:**

**5. Relevant Educational background:**

**6. Why did you decide to apply for this IPP? What do you hope to gain from the experience and contribute to it?**

**7. Spoken languages and Proficiency**

<i>Language:</i>	<i>Fluent</i>	<i>Average</i>	<i>Poor</i>
a).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_