



## Fall Break Study Tour to the Philippines 2017 Program Information Sheet

### **PROGRAM INFORMATION:**

- Trip dates: Mandatory pre-trip orientation: September 23, 2017; Travel: October 7 – 15, 2017 (tentative)

- Eligibility: Students in grades 9 – 12 attending high school in Hawaii in fall 2017.

- Trip Description: Students will explore the cultural, economic, and political heterogeneity of contemporary Philippines. They will visit historical sites, explore both urban and rural environments, and learn about local efforts to combat poverty and inequality at the grassroots level. Students will participate in cultural exchanges at local schools and visit public, private, and governmental institutions that shape the diverse landscape of the Philippines. The trip intends to show students how travel and global education correlates to various career paths, encourage participation in future travel and study abroad opportunities, and bridge connections between their local and world communities.

- Program cost: **Tentatively** \$2,500 plus international airfare (estimated at \$1,000) and interisland airfare (for participants who do not live on Oahu). Price includes all program related expenses such as transportation, accommodation, meals, activities, travel insurance, and entry fees, and does not cover personal expenses such as laundry, communication, snacks, and souvenirs. Current cost estimate is based on previous year's costs and is subject to change.

- Scholarship Eligibility: Public and charter high school students in Hawaii are eligible for need-based, partial program scholarships (\$1,000 - \$2,000). Preference is given to students with financial need who participate in PAAC Clubs, After School Classes, or events.

### **REQUIRED MATERIALS AND INSTRUCTIONS: Application deadline is April 21, 2017**

1. **Application Form.** Complete and mail requested documents.

2. **Consent Form.** This form can also be downloaded from the PAAC website.

3. **Short Essay:** Applicant must write an essay of 600 words or fewer.

- I. Why are you interested in traveling to the Philippines with this program? What do you hope to gain from this experience? How will your participation contribute to the program and to PAAC in the future?

The essay is a very important part of the application. **Tips for writing a good essay:**

- Ask teachers, parents, and/or friends to give you feedback. Revise your essays until you are satisfied that you have done your best.
- Avoid general statements like, "I want to go on this trip to learn about the culture," without elaborating. Be specific and give examples whenever possible.

- Proofread! Do not turn in essays with grammatical or spelling errors.

**4. School Transcript:** Unofficial transcript copies are acceptable and can be obtained from your school. If you are in grade 9, upload one copy of your middle school transcript.

**5. Teacher Recommendation form and letter (One only):** Give the recommendation form (this form can be downloaded from the PAAC website) to your PAAC Club advisor, PAAC class teacher, or a school teacher who has known you for at least one year. If you are in the 9<sup>th</sup> grade, you may ask a teacher at your current school who would be willing to recommend you, or a teacher from 8<sup>th</sup> grade. He or she may return his or her recommendation form and letter directly to PAAC, or you may upload/send it if you submit your application online. If your teacher will submit these documents directly to PAAC, provide a stamped envelope addressed to:

PAAC Selection Committee  
1601 East-West Road, 4<sup>th</sup> Floor  
Honolulu, Hawai'i 96848-1601

Your teacher's recommendation form and letter must be postmarked by **April 21, 2017** and is required in order for your application to be considered. Please allow your teacher plenty of time to complete the form and write the letter. More than one week is recommended.

**Please note:** Family members may not serve as references.

**If you have any questions, contact:**

Erica Nakanishi-Stanis  
PAAC Study Tour and Competition Coordinator  
Tel. (808) 944-7784  
Email: paac@paachawaii.org

**APPLICATION PROCESS:**

-Submit completed application and supporting documents by the application deadline: **April 21, 2017**.

-Applications will be reviewed.

-Finalists will be contacted for an in-person interview in May. Applicants who live on the neighbor islands will be interviewed via video conference.

-All applicants will be notified of the Selection Committee's decision following the interviews.

\*Please do not send the instruction pages in with your application.

**Caution:** The name you provide under "Full Name" is what we will use to book your flight ticket. If the name written is different from what is in your passport, you will be responsible for paying the fee to change the name on the ticket.



**STUDENT APPLICATION**  
**Pacific & Asian Affairs Council**  
**Fall Break Study Tour to the Philippines**

Send completed application to:  
 Selection Committee  
 1601 East-West Road, 4<sup>th</sup> Floor  
 Honolulu, Hawai'i 96848-1601  
*All applications must be postmarked on or before April 21, 2017. Late applications will not be considered.*

Will you be available for an in-person interview (Oahu students) or Skype interview (neighbor island students) in May?    \_\_\_ Yes    \_\_\_ No

**APPLICANT INFORMATION:**

Name (as it appears or will appear on your passport): \_\_\_\_\_  
First Name (s)

\_\_\_\_\_ Middle Name(s) Last Name(s)

Preferred name (if different from first name): \_\_\_\_\_  Male  Female

Home mailing address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Citizenship: \_\_\_\_\_

Home telephone number: \_\_\_\_\_ Student's cell phone number: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_      Email address: \_\_\_\_\_

Current school: \_\_\_\_\_ Current grade: \_\_\_\_\_

Principal's name: \_\_\_\_\_ Counselor's name: \_\_\_\_\_

**Do you have a valid U.S. Passport?**    Yes \_\_\_ No \_\_\_    If you answered yes, please indicate your passport's place of issue \_\_\_\_\_ date of issue \_\_\_\_\_ and expiration date \_\_\_\_\_

**Are you a member of a PAAC Club or After-School Class?**    Yes \_\_\_ No \_\_\_  
 If yes, indicate whether you are in a club or class, and provide the name of your PAAC advisor or teacher.

**PAAC involvement** (check all that apply):  
 \_\_\_ Club      \_\_\_ After-school class: which semester(s)? \_\_\_\_\_  
 \_\_\_ Fall Conference '13    \_\_\_ Fall Conference '14    \_\_\_ Fall Conference '15    \_\_\_ Fall Conference '16  
 \_\_\_ WorldQuest '13    \_\_\_ WorldQuest '14    \_\_\_ WorldQuest '15    \_\_\_ WorldQuest '16  
 \_\_\_ GVS '14    \_\_\_ GVS '15    \_\_\_ GVS '16    \_\_\_ GVS '17  
 \_\_\_ Previous PAAC scholarship recipient/study tour participation  
 (please specify: \_\_\_\_\_)

**ACADEMIC INFORMATION:**

Provide one copy of your most recent school transcript and first quarter grades with your application.  
List the languages (other than English) that you speak and indicate your years of study and level of proficiency:

\_\_\_\_\_

**EXTRACURRICULAR ACTIVITIES:** (continue on a separate sheet if necessary)

Please list the extracurricular activities that you participate in **at least once a week:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OTHER INFORMATION:** (continue on a separate sheet if necessary)

Have you ever been involved in disciplinary action at school or elsewhere? If so, please describe briefly.

\_\_\_\_\_

List your experiences traveling, living, or studying outside of Hawaii. Include location, purpose, and dates.

\_\_\_\_\_

\_\_\_\_\_

List any hobbies, skills, or areas of special knowledge or expertise (e.g. hula, singing, clarinet, paddling).

\_\_\_\_\_

Do you have any dietary preferences (vegetarian, vegan, kosher, etc)? (Please specify)

\_\_\_\_\_

**The following sections should be completed by Parent(s)/Guardian(s):**

Parent/Guardian's Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell)

Parent/Guardian's Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_ (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell)

With whom does the applicant live? \_\_\_\_\_

(Please indicate whether with both parents, mother, father, relative, guardian, etc.)

**HEALTH INFORMATION:**

Please specify any health or medical condition or restrictions your child has that we should know about.

---

Does your child have any allergies or dietary restrictions, or currently take any medication? (Please specify)

---

**FINANCIAL INFORMATION**      *\*If you would like to be considered for a scholarship, please complete this section.*

Is your child enrolled in a free or reduced lunch program at school?       Yes     No

Please indicate your household adjusted gross income for 2016: \_\_\_\_\_

How many dependents are there in your household? \_\_\_\_\_

Please describe any special circumstances that indicate need for financial assistance for this program:

---

**To the parent(s) or guardian(s):**

Studying and traveling in foreign countries offers young people a unique opportunity to learn and develop personally. The students will also represent the United States of America, Hawaii, and their schools. Criteria for selection will heavily weigh on a student's maturity and ability to adjust.

**IMPORTANT- Please read and sign the following statement:**

I/we grant the Pacific and Asian Affairs Council (PAAC) permission to check with my child's school counselor and principal to determine if my child has demonstrated good citizenship, responsibility, and emotional stability.

In order to assist PAAC in attending to the health and safety of my/our child, I/we acknowledge that I/we have provided PAAC a complete and full description of any health condition(s) or medical restriction(s) that my/our child may have. By completing this application, I/we consent that this information, along with information from school records, teachers, counselors or deans can be used in determining my/our child's suitability for this program, providing for the safety of my/our child, and providing information when health, illness, injury or behavior may have an effect on my/our child's intended study abroad program. I/we further acknowledge that PAAC reserves the right to select participants for this program based on PAAC's determination of each child's suitability.

---

Signature of Parent or Guardian/ Date

---

Signature of Parent or Guardian/ Date

**To the applicant:**

I certify that all information provided in this application is true, and should any discrepancies come to light, I understand that my application will be discarded and/or my scholarship revoked.

---

Signature of Applicant/ Date

# RECOMMENDATION FORM

Pacific and Asian Affairs Council (PAAC) Fall Break Study Tour to the Philippines  
Form and letter must be postmarked by April 21, 2017.

THIS SECTION IS TO BE COMPLETED BY THE APPLICANT:

Name of applicant: \_\_\_\_\_  
First Middle initial Last

School : \_\_\_\_\_ Grade: \_\_\_\_\_

-----  
THIS SECTION IS TO BE COMPLETED BY THE RECOMMENDER:

**Please submit your letter of recommendation with this document.**

Name of person completing this recommendation: \_\_\_\_\_

Position or title: \_\_\_\_\_

How long have you known this student? \_\_\_\_\_ In what capacity? \_\_\_\_\_

How would you evaluate this student in the following areas? Please comment on these areas in your letter.

	Exceptional	Very good	Above average	Average	Below average
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility and reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

In addition, please comment on the following in your letter:

- How has this student demonstrated a commitment to international affairs (through PAAC or other activities)?
- Does this student work well independently and take responsibility for him/herself?
- Does this student consistently meet deadlines without reminders?
- How has this student demonstrated the maturity and independence necessary to take part in a study abroad program?

May we contact you if we have further questions regarding this applicant? \_\_\_\_\_ Yes \_\_\_\_\_ No

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please send this form to:

**Selection Committee, PAAC Travel Program, 1601 East-West Road, 4<sup>th</sup> Floor, Honolulu, Hawai'i 96848-1601**

Or E-mail it to [paac@paachawaii.org](mailto:paac@paachawaii.org)

Please call Erica Nakanishi-Stanis at (808) 944-7784 with any questions. Thank you!