



Virtual Friendship Connection Application Form 2025

Please type answers, no handwriting

Scan/email completed form to: FC.allforms@gmail.com

Drop picture here

Full Name:

Street address:

Apt#:

City:

State:

Zip:

Date of birth (MM/DD/YY):

Grade:

Gender identity:

Parent cell:

Parent cell:

Student cell:

Home Phone:

Student email:

School name:

Parent(s) email(s):

Name of German teacher:

Social media platform(s) contact information:

Parents(s) full names:

Occupation(s):

Name of Employer:

Work phone number:

Name of Employer:

Work phone number:

Attach picture in square

Participating students must agree to the following:

- I agree to correspond frequently with my German partner in an attempt to get to know them better.
- I agree to be respectful and responsible on all social media platforms to make a good impression on my German partner and their family.
- I agree to discuss and complete the monthly "VFC Partner Projects" with my German partner. Projects will be sent to the students by The Friendship Connection at the beginning of the month from May - August 2025.

Parents must agree to the following:

- I agree to periodically check in on my child to make sure they are corresponding frequently and responsibly with their German partner.
- I agree to pay the **\$75 participation fee** via PayPal, Venmo or by check after receiving an email confirmation from The Friendship Connection once this application form has been processed. Payment information will be included in the email invoice.
- I understand that my child will only be allowed to host their German partner in the spring of 2026 if the school principal approves The Friendship Connection, Inc. "Full" Exchange Program during the 2025-2026 school year. (Your child must be 15 years old or older by the 2026 June departure date in order to travel to Germany.)
- I understand that the information on this form will be shared directly with the German family in May as well as limited contact information on participation lists, which will be sent to the German teacher and participating classmates from your child's school.

Parent/Guardian signature: _____ Date: _____

To be filled out by the student participant:

First Name:

School Name:

Age:

Grade:

Sibling(s) name and age(s):

Do you have any pets? If yes, what kind and how many?

Do you have any allergies, medical conditions or physical handicaps? If yes, please explain. *(This is important for The Friendship Connection and the German family to know if you intend to travel to Germany next year.)*

Have you ever traveled or lived outside of the U.S.? If yes, please describe:

Describe your community and surrounding area, including sightseeing possibilities, museums, etc. which might interest a visitor.

What subjects do you like in school and why?

What profession or occupation are you considering and why?

Describe your favorite interest, hobbies and free time activities.

Please write as many detail as possible! This will help us find the best match for you!

PRINT form, attach picture, have a parent/guardian sign and date, email form to: FC.allforms@gmail.com

The Friendship Connection, Inc. * Krista Winzer-Lee, Coordinator * Krista.FC@gmail.com * c: 330-618-6127