

TORRANCE SISTER CITY ASSOCIATION (TSCA)
STUDENT CULTURAL EXCHANGE PROGRAM
DETAILS

A. **WHAT**

The annual student cultural exchange program with Kashiwa, Japan.

B. **HISTORICAL BACKGROUND**

Torrance and its sister city, Kashiwa, Japan, have had many rewarding civic, educational, and cultural exchanges since February 20, 1973, when the two cities became affiliated.

Under this program, over the past forty years, the Torrance Sister City Association has sponsored hundreds of exchange students.

C. **QUALIFICATIONS**

1. Any high school student who is a sophomore, junior or senior at the time of applying. (19-year old maximum age at the time of the trip.)
2. **The student must be a FULL TIME resident of the City of Torrance.**
3. The student must be mature enough to benefit from the experience and be a creditable representative of the Torrance Sister City Association, the City of Torrance, and the United States of America.
4. The applicant must be a student in good academic standing at his/her school.
5. The student must be interested in learning about Japanese customs, culture, and language. **This trip is far more than a vacation in a foreign country; it's a cultural experience!**
6. If selected, the student's family **must** be able to host a Kashiwa student in their home for 10-12 days during August.

D. **EXPECTATIONS OF ALL APPLICANTS**

1. Each applicant and his/her family are expected to attend an Alumni Reunion potluck luncheon hosted by the TSCA in early January. At this luncheon the applicants and their families will meet many TSCA members, including former exchange students, and learn more about the student exchange program.
2. Each applicant and his/her parents will be interviewed by the Student Selection Committee on a Saturday in January, beginning at 8 a.m.
3. Each applicant is expected to participate in TSCA scheduled activities during January, February, and March.
4. Each applicant's family is **required** to submit a TSCA family membership application and dues of \$40.00 when the student applies for the Exchange Program. Make check payable to: TSCA. Electronic payment accepted on membership page of website.

E. **EXPECTATIONS OF SELECTED STUDENTS**

1. Each student and his/her parents must participate in Bunka Sai, a festival of Japanese culture (the major fund-raising event for TSCA). This is a three day event (Friday evening, Saturday and Sunday) during the month of April.

2. Prior to departing for Japan, each student shall attend a minimum of eight orientation meetings which cover the language, customs, clothing, protocol, etiquette, behavior, etc. in Japan, as well as facts about the City of Torrance. (If a selected student fails to participate in the TSCA activities or does not attend Bunka-Sai or the orientation meetings, he/she may be dropped from the program.)
3. Each student shall participate in activities planned for the Kashiwa exchange students visiting Torrance in August. Admission costs for students to activity events will be paid by TSCA.
4. Each student and his/her parents shall sign an Agreement concerning their obligations, a letter of permission to participate in the program, and a medical release form.

F. **FINANCIAL OBLIGATIONS**

1. The student's portion of the airfare shall be \$1200, payable in two checks (\$600) at the first and last orientation session.
2. The TSCA is to provide the balance of the airfare costs and all expenses related to the three-day tour of other areas in Japan.
3. The student shall provide his/her own spending money during the three-week stay in Japan, as well as gifts for their host families.
4. The student **must** possess a current, valid **passport** at least 60 days before leaving for Japan. Passport must also be valid for at least six months from the departure date. Please indicate expiry date. If a visa is also required, the student is responsible for obtaining such visa.

G. **PROCEDURE FOR SELECTION**

1. The TSCA Student Selection Committee will review all applications.
2. The applicants and their families shall attend the Alumni Reunion potluck lunch in January
3. The Committee will interview applicants and their parents on a scheduled Saturday in January.
4. On a mutually convenient date after the interview, a committee member(s) will conduct a home visit interview with each applicant and his/her family, during the month of February.
5. The applicants shall participate in all the scheduled activities during January, February and March.
6. Final selections will be made by the Committee in early March.

H. **CRITERIA FOR STUDENT SELECTION**

1. A sincere interest in Japanese culture, language and customs.
2. A willingness to participate in TSCA pre-selection activities.
3. Good citizenship.
4. The ability to handle new or stressful situations gracefully.
5. The ability to get along with others and work together.

TORRANCE SISTER CITY ASSOCIATION (TSCA)
STUDENT CULTURAL EXCHANGE PROGRAM
APPLICATION FORM

INSTRUCTIONS

SUBMIT THE FOLLOWING, IN ADDITION TO THIS FORM,
postmarked on or before **the 3rd Monday in December.**

1. A one-paged **typed, signed** letter from the **applicant** stating why he/she wants to participate in this program and how he/she expects to benefit from it.
2. A one-paged **typed, signed** letter from the applicant's **parents** stating why they recommend their child for this program and how they will support their child's participation in this program.
3. A current **wallet size photo of you** only. Put full name and school on back. This photo will not be returned.
4. One recommendation form completed and emailed in **by a teacher and a community person not related to student.**

***Address application to:**
Torrance Sister City Association
c/o Community Services Department
3031 Torrance Blvd.
Torrance, CA 90503
Attention: Student Selection Committee

Applications with photo accepted by email to: torrancesistercityinfo@gmail.com. Put student name in subject line. Electronic payment of \$40 membership dues must be paid by PayPal (link on website.)

Print clearly or type

APPLICANT'S NAME _____

SCHOOL _____ GRADE _____ AGE _____

DATE OF BIRTH _____ HOME# _____ CELL# _____

ADDRESS _____ CITY _____ ZIP _____

EMAIL _____ PASSPORT EXPIRATION DATE _____

PARENTS OR GUARDIANS NAMES _____

PARENT'S EMAIL _____ PARENT'S CELL _____

BROTHERS/SISTERS NAMES/AGE(S) _____ OTHERS LIVING IN HOME: _____

PRE-EXISTING HEALTH CONDITION: _____

PETS (i.e., two dogs) IN HOME: _____

See back page to complete list of school, community activities and educational/career goals.

1. SCHOOL ACTIVITIES

(Clubs, Sports etc., leadership positions and number of years involved, including current year.)

Clubs	Years	Sports	Years	Other	Years

2. COMMUNITY ACTIVITIES

(Church, Sports, Volunteer Work, etc. and years involved)

Activity	Years	Activity	Years	Activity	Years

3. EDUCATIONAL/CAREER GOALS _____

4. OTHER INFORMATION/HONORS & AWARDS _____

TORRANCE SISTER CITY ASSOCIATION (TSCA)
STUDENT CULTURAL EXCHANGE PROGRAM
RECOMMENDATION FORM DIRECTIONS:

Please rate the applicant in all areas, by checking the appropriate box. **Your ratings and comments will be kept confidential.** Please make additional comments explaining your ratings. Please send recommendations by email to torrancesistercityinfo@gmail.com. Put student name in subject line of email. Thank you very much for taking the time to do this for the student. **Due by third Monday of December.**

APPLICANT'S NAME: _____ SCHOOL/GRADE _____

Areas	Outstanding	Above Avg.	Average	Below Avg.	Not observed
1. Maturity and judgment					
2. Sense of responsibility					
3. Motivation to do well					
4. Leadership					
5. Emotional stability under stress					
6. Consideration of others and tact					
7. Genuine interest in people (vs. self-promotion motives)					
8. Intellectual curiosity (openness to new ideas)					
9. Depth of understanding					
10. Oral communication (in general)					
11. Speaking before large groups					

How would you recommend this student? (Circle the appropriate response).

Without Reservations **Very Strongly** **Strongly** **With Reservations** **Not At All**

Print Name _____

Position/Relationship _____

(See reverse side for balance of recommendation form)

12. What are this student's strengths in terms of representing his/her community?

13. What are this student's weaknesses?

14. How well do you know this student?

15. How long have you known this student?

Additional comments:

TORRANCE SISTER CITY ASSOCIATION
Membership Application

Except for Life Membership, all annual are in effect from January 1st to December 31st

Name: _____

Address: _____

City: _____ State _____ Zip Code _____

Telephone (____) _____ Email: _____

My membership is: NEW _____ RENEWAL _____ I do not want to be listed in the TSCA Directory _____

Directory update: New address _____ New telephone number _____ New Email address _____

I am interested in participating in TSCA activities: _____

Enclosed is a donation to TSCA (in addition to my annual dues) in the amount \$ _____.

Total enclosed: \$ _____

Make your check payable to TSCA and mail with this form to:

The Torrance Sister City Association
c/o The Community Services Department
3031 Torrance Boulevard
Torrance, CA 90503

TSCA meetings are held on the second Monday of each month, except in August and December, at the Civic center West Annex Commission Room, 7:00 p.m.

TorranceSisterCity.Org

This form and a check payable to TSCA for \$40.00 ***must*** be submitted with completed application. Application ***must*** include all five items listed at top of application form.