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TALL Emerging Leaders Program Study Abroad/Internship (Texas/Poland Exchange) 2024 In-House INFORMATION FORM

Personal information			First & Last name:			:	Age:	Sex:	M
Birth Date			Month:			Date	Date: Year:		
Address			Zip Code			City/State	Street	Street Address	
County									
E-mail / Phone									
Emergency contact	(name)								
	Phone/e-mail								
Family members-	mother,	father,	broth	ers, an	d sister:	S			
Name F		Relatio	Relationship		Age	Occupation			

Serious medical issues, operations, allergies, etc. (When/Year, What kind)	
Type of farm or experience you are interested in. This will help us place you.	
Ex: Dairy, Beef, Wheat, Fruit Vegetables, Corn, Poultry, Etc.	
Name of school/university Major / Classification	
Leadership Experiences	
Personal hobbies or interests Ex: hunting, music, fishing, canoeing, hiking, history, boating etc.	
Why do you want to participate in the Young Farmer Exchange Program	
How did you hear about our program?	
Χ	
Participant Signature	
Parent/Guardian Signature	<u></u>