

Summer Work & Travel Program Application Form

First name	Last name Email		Date of birth
Telephone (+358 40 123 4567)			
Name of university / university of a	applied sciences you attend		
Major field of study			When will you graduate?
Emergency contact name			Relationship to applicant
Telephone	Email		
Estimate your own English skills	Conversational / Spoken English Excellent Good Fair		Written English Excellent Good Fair
Please list hobbies/interests and s	pecial skills		
Do you have any chronic medical conditions or allergies? No If yes, please specify			Yes
Have you entered the US on a J-1 If yes, please list program year, pr		No (high school, travel,	Yes etc.)
Preferred job position in the USA (choose two of your favorites) Admissions Exploratory attendant Park services / maintenance			Food sales / concessions Lifeguard Retail sales
Employer will reserve the right to o			
Are you willing to work 6 days / we	eek?	☐ No	Yes
I certify that I meet Summer Work	& Travel program eligibility crit	teria and have truth	fully completed this application.
Signature			Date