



usa

building global friendship

Supplement VYD

Village Youth Delegate Application Supplement

Applicant's Name _____

The Village Applicant should complete the first section by filling in the blanks or checking all the answers that describe you best.

My Family and Home:

I have _____ brothers and _____ sisters. Their ages are _____.

We play _____

☐ like ☐ do not like to play alone. I help at home by _____

The thing I like to do best at home is _____ My favorite food is _____

My least favorite food is _____ I ☐ like ☐ do not like to try new things to eat.

My Friends:

My best friend is _____ I like him/her because _____

I would rather play ☐ at my house ☐ at my friend's house

because _____

My Pets:

I have a pet _____ I ☐ do ☐ do not help take care of my pet(s).

I do not have a pet because _____

My Travels and Adventures:

I have traveled by: ☐ bus ☐ car ☐ airplane ☐ boat ☐ train ☐ bicycle ☐ pony

I have visited: ☐ circus ☐ zoo ☐ farm ☐ hotel ☐ airport ☐ fire station ☐ factory ☐ museum ☐ other

The best adventure I ever had was _____

I like to read about _____

The best book I ever read was _____

I have _____ books of my own at home. I ☐ get ☐ do not get books from the library.

Movie and TV Favorites:

I watch _____ movies each month. I listen to _____ on the radio. I watch _____ TV programs every day. My favorite TV show is _____ why? _____

Likes and Dislikes:

I like _____ I do not like _____ I am
afraid of _____ I am not afraid of _____ Things I like
best about school are _____ When I have
nothing else to do I like to _____

My Wishes:

When I grow up I want to be _____ If I
could have three wishes, they would be:

1

2

3

Please answer the following questions

Have you attended a camp?

If so, what type of camp?

What did you like and dislike about the camp?

Describe any other experiences away from home without your parents.

Describe a recent happy day in your life.

How do you imagine you will feel about being away from your home and family for one month?

Village Family Responsibilities:

- **Host meetings in the home in preparation for the Village experience and as a follow-up after the delegation returns.**
- **See that the delegate attends scheduled delegation meetings.**
- **Attend parent meetings and participate in Chapter activities.**
- **Pay all fees designated by the Chapter by the established deadlines.**
- **Complete the delegate's passport and visa application, if applicable, within two weeks of selection notification.**
- **Submit the required CISV Health and Legal Information forms by the established deadlines and obtain any necessary immunizations.**
- **Decide with the leader and other parents the amount of spending money to take to the Village and comply with that decision.**
- **Provide emergency money as determined by the delegation leader and Chapter with the understanding that emergency money not used will be returned to parents.**
- **Cooperate fully with the delegation leader and encourage your child to accept the leader's authority during the preparation and travel phases and at the Village.**
- **Be informed about the CISV program so that you can provide a positive and supportive atmosphere for your child.**
- **Help your child understand that he/she is representing the Chapter and the United States as a goodwill ambassador. If a child's behavior is unacceptable at a Village it is the parent's responsibility to make arrangements to bring the child home. According to National CISV policy, children under 16 may not travel unless accompanied by an adult.**
- **Assist your child in sharing the Village experience at a Chapter meeting and at other non-CISV meetings for publicity purposes if asked.**
- **Participate in evaluations of the Village experience as requested by the Chapter.**
- **Support and participate in Chapter activities throughout the year and keep informed of Junior Branch activities so that the delegate can participate.**

Family Acknowledgement:

We are aware of CISV's policy for selection, preparation, training and the responsibilities of Village delegates and their families. We are prepared to let our son/daughter participate in a CISV Village Program and regard him/her as both physically and psychologically fit to participate. We are also prepared to support our son/daughter in his/her future involvement in CISV.

VILLAGE SUPPLEMENT SIGNATURE FORM

Signature of Mother/Guardian

_____ Date: _____

Signature of Father/Guardian:

_____ Date: _____

Applicant Signature:

_____ Date: _____

This form must be completed and returned no later than December 31, 2025.

**Please print out your completed form, sign it, and then scan the signed form and email it to the Chapter at
Villagephilly@cisvusa.org**