



**S.W.I.F.T.**

**INFORMATION REQUEST FORM**

NAME, Last: \_\_\_\_\_ First: \_\_\_\_\_ Tel. #: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, ZIP CODE: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PLEASE INDICATE WHICH PROGRAMS YOU ARE INTERESTED IN (Check all that apply):

Hosting a foreign student

Becoming a part of the SWIFT team

Participating in a language study program overseas  
(Please indicate your age:  14-18  19-26  26+)

Participating in an internship program overseas  
(Please indicate your age:  14-18  19-26  26+)

Participating in a volunteer program overseas  
(Please indicate your age:  14-18  19-26  26+)

Other (please specify below)

HOW DID YOU FIND OUT ABOUT SWIFT? (Please mark all that apply)

Friend/Personal Reference  Internet  Newspaper

Television  Radio  Other (please specify)

COMMENTS:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Submit Information**

**Reset Form**