

SCHOOL CHECKLIST FORM

EXCHANGE STUDENT NAME: First Last				
SCHOOL NAME:				
School Start Date: School End Date:				
ROTARY DISTRICT ROTARY CLUB NAME:				
NOTE: copy of this	form should be given to the school and one copy sh	ould be put into the s	students file	
Statement			Yes	No
We have been provided with a translated "written English language summary" of the exchange student's complete academic course work prior to commencement of school.				
If the Exchange Student has completed secondary school prior to enrolling in a U. S. School, we have been notified by ESSEX.				
We have determined that the student has not completed secondary school prior to enrolling in a U. S. School.				
4. The student will be eligible for graduation.				
5. The student will be eligible for participation in interscholastic sports if academic and other conditions of eligibility are maintained.				
6. This school is accredited.				
	SCHOOL OFFICIAL	YOUTH EXCHANGE ROTARY COUNSELOR OR REPRESENTATIVE		
NAME (Print)				
Signature				
Address				

Telephone Number

Email address

DATE