



HOME, HEALTH, AND HEART: YALE SERVICE TOUR 2008

APPLICATION

We hope you can join the AYA and Dwight Hall for this extraordinary inaugural Yale service tour! Please complete and return your application as early as possible—applications are being considered on a first-come, first-served basis. Please mail your application, along with the initial deposit of \$250 per person, to: **ASSOCIATION OF YALE ALUMNI, YALE SERVICE TOUR 2008, P.O. Box 209010, NEW HAVEN, CT 06520-9010**. If you apply promptly, your participation will be virtually assured. However, we may not be able to accept all applicants due to space constraints. If you are not selected for this tour, your full deposit will be returned. Please note, participants on this program must be **at least 18 years old**.

The postmark deadline for applications to the program is **December 17, 2007**. If you have any questions, please contact Remy Shaber at the Association of Yale Alumni: (203) 432-1955, or via e-mail: remy.shaber@yale.edu.

Personal Information:

Full Name (as on passport): _____ Class Year: _____

Other Yale affiliation: _____ Degree Year (if applicable): _____

Home Address _____ City, State _____ Zip Code _____

() ()
Home Phone _____ Cell Phone _____ Email (required) _____

Passport # _____ Date of issue (mm/dd/yy) _____ Place of Issue _____ Exp. date _____

Citizenship _____ Date of birth (mm/dd/yy) _____ Place of birth (city, state/province) _____

Occupation: _____ Company/Employer/School Name: _____

Traveling party:

- I prefer the Complete Program Package, including travel from NYC to Santo Domingo.
- I prefer the *Ground-only* Package, and I will arrange my own travel to Santo Domingo.
- I will be traveling alone.
- I will be accompanied by spouse/friends/family. Including me, there will be _____ in my party.

Please tell us who will be in your party:

<u>Full Name</u>	<u>Relationship to Primary Applicant</u>	<u>Full Name</u>	<u>Relationship to Primary Applicant</u>
1.		4.	
2.		5.	
3.		6.	

Volunteer Assignments:

We will try to make assignments based on your request. If you are interested in serving in more than one area, please check all that apply.

- I would prefer to serve on the painting and light construction teams.
This team will work in the town of Vallejuelo, with accommodations in San Juan de la Maguana.
- I would prefer to serve on the team leading arts enrichment programs for elementary age schoolchildren.
This team will travel up to the mountain village of La Cucarita (4-hour drive from San Juan de la Maguana) for 4 days, with group dormitory-style accommodations in the village.
- I would prefer to serve on the medical team conducting health clinics.
This team will travel among four villages in the mountains to examine patients, with camping or homestay accommodations.
- I would prefer to serve as support crew, assisting with meal preparations and setup at the worksite.
Support crew will be needed for all three teams.

Specialized Skills and Qualifications:

Do you speak Spanish?

- Yes, fluently Conversational, enough to get by A little, basic words and phrases No

Please tell us about your other skills and qualifications (check all that apply).

**The following skills are not required for participation in the program, but it is helpful for us to know!*

- | | |
|---|--|
| <input type="checkbox"/> Construction project management | <input type="checkbox"/> Teacher (specialty: _____) |
| <input type="checkbox"/> Plumbing (check if licensed <input type="checkbox"/>) | <input type="checkbox"/> Dance |
| <input type="checkbox"/> Electrical (check if licensed <input type="checkbox"/>) | <input type="checkbox"/> Music (specialty: _____) |
| <input type="checkbox"/> Chef | <input type="checkbox"/> Athletic instructor/coach |
| <input type="checkbox"/> Mechanic (specialty: _____) | <input type="checkbox"/> Fine arts or craftwork (please specify skills—e.g., painting, quilting):
_____ |
| <input type="checkbox"/> Pharmacist (check if licensed <input type="checkbox"/>) | |
| <input type="checkbox"/> Medical doctor
(specialty: _____) | |
| <input type="checkbox"/> Nurse Practitioner / Physician's Assistant | <input type="checkbox"/> Other:
_____ |
| <input type="checkbox"/> Nurse | |

International Volunteer Experience:

Please list any *international* volunteer experience you have (Peace Corps, Habitat for Humanity abroad, etc.).

Organization/Project

Location

Dates

Rooming Arrangements:

- I am traveling alone, and would like to have a roommate assigned.
- I am traveling alone, but I have a roommate. Please arrange for me to room with: _____ .
(Please confirm with other person traveling.)
- I will be traveling alone and would like to have a single room, understanding that I will pay an additional \$305 single room surcharge.

Please note - we cannot guarantee the following rooming arrangements, but we will try to accommodate if possible:

- We are traveling as a **couple** and would like: one double bed separate beds
- We are traveling as a **family** (3 or more) and would like: 2 double beds separate adjoining rooms
- We are traveling as a **group** and would like: adjoining rooms with double beds adjoining rooms with separate beds

Scholarships / Contributions

The AYA and Dwight Hall are establishing a fund for service tour scholarships, so that students will be able to participate and work alongside alumni on these programs. Please let us know if you would like to support a student scholarship for this program.

- I am interested in providing a tour scholarship for a student or young alumnus at:
 \$500 \$1,000 \$1,500 full cost (\$1,995) Other: _____
- I am interested in applying for a scholarship. I have attached a Yale Service Tour 2008 Scholarship Application, along with the required enclosures. *Deadline to apply for a scholarship: **December 7, 2007**.
- I would like to make the following tax-deductible contribution to fund construction supplies and/or materials for arts enrichment activities:
 \$20 \$50 \$100
 \$250 \$500 \$1,000 \$1,500 Other: _____

Program Fees

Complete Program Package <i>(includes airfare from NYC to Santo Domingo, accommodations, meals, construction tools and materials at worksite, all travel and special program activities in Dominican Republic, and optional group orientation in NYC prior to departure)</i>	\$1,995
Ground-only Package <i>(excludes airfare to the Dominican Republic)</i>	\$1,395
Single occupancy room supplement	\$305
Optional 3-day tour extension to Santo Domingo	\$400 - \$500

Enclosed Payment

\$250 deposit per person (nonrefundable after Dec. 17, 2007): \$250 x _____ (# of applicants in your party) =	\$ _____
\$200 deposit per person for optional tour extension (nonrefundable after Dec. 17, 2007): \$200 x _____ (# of applicants in your party participating in the optional tour extension) =	\$ _____
Tax-deductible contribution for a tour scholarship or project materials	\$ _____
Total Payment Enclosed	\$ _____
Payment Method: <input type="checkbox"/> Check enclosed (please make payable to "Association of Yale Alumni") <input type="checkbox"/> Credit Card: ___ Visa ___ Mastercard ___ American Express <div style="display: flex; justify-content: space-between;"> <div style="width: 45%; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="width: 45%; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <div style="width: 45%;">card number</div> <div style="width: 45%;">exp. date</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%; border-bottom: 1px solid black; margin-bottom: 5px;"></div> <div style="width: 45%; border-bottom: 1px solid black; margin-bottom: 5px;"></div> </div> <div style="display: flex; justify-content: space-between; font-size: small;"> <div style="width: 45%;">signature of cardholder</div> <div style="width: 45%;">name as it appears on card</div> </div>	

Please mail completed application to:
Association of Yale Alumni, Yale Service Tour 2008, P.O. Box 209010, New Haven, CT 06520-9010.

Remember—applications must be postmarked by December 17, 2007. We hope to hear from you!

If you have questions about the 2008 Yale Service Tour, please contact Remy Shaber '98, *Service Tour Coordinator*, at the AYA: (203) 432-1955, or by email: remy.shaber@yale.edu. Thank you!

Home, Health and Heart: Yale Service Tour 2008
SCHOLARSHIP APPLICATION

FINANCIAL ASSISTANCE FOR TOUR PARTICIPANTS

Scholarship awards for Yale Service tours will be based on financial need. Note that, **if you wish to be considered for financial assistance, the application postmark deadline is December 7, 2007** (as opposed to the general deadline of December 17). Please mail this scholarship form and the required attachments **together with** your *Home, Health and Heart* application and initial deposit of \$250. If you have any questions, please contact Remy Shaber at the Association of Yale Alumni: (203) 432-1955, or remy.shaber@yale.edu.

A. GENERAL INFORMATION

Name of Applicant: _____ Yale Class: _____

Address of Applicant: _____

E-mail (please print clearly): _____ Phone: _____

B. AMOUNT OF REQUEST

Please indicate what portion of the program fee (\$1,995) you are able to pay: 10% 25% 50% 75%

C. PREVIOUS VOLUNTEER EXPERIENCE

1. Have you previously received scholarship funding for Dwight Hall trips (as a student or alumnus/a)? Yes No
If yes, please specify: _____

2. Please tell us a little about your volunteer experience (including Board and Committee service)—with Dwight Hall, in the New Haven area, and/or post-Yale:

<u>Organization/Program</u>	<u>Location</u>	<u>Dates of service</u>

Please include the following items with your scholarship request:

1. A brief written essay (limit one-page) describing the reasons for your personal interest in the *Home, Health, and Heart* tour and what benefits might accrue to you, to Yale, or to the community being served from your participation in this program. Please feel free to add any information that you feel might enhance your application.
2. A copy of your 2006 individual tax return.
3. A copy of your October or November 2007 bank statement.
4. Your completed *Home, Health, and Heart* application together with your initial deposit of \$250. *If you are not awarded the full amount of your scholarship request and therefore cannot participate in the tour, your entire \$250 deposit will be refunded.

I agree that, if I am awarded financial assistance for the Yale Service Tour 2008, I will participate fully for the duration of the tour. Following completion of the tour, I agree to submit a one-page written report on my activities made possible by the AYA and Dwight Hall funding. I affirm that the enclosed information is accurate and complete to the best of my knowledge.

Signature: _____ Date: _____