

For Office Use Only

Application #:

Alternative Break Spring 2009
Participant Application
\$30 Nonrefundable deposit due with application

Participant Selection

Participants are selected by trip leaders based on the responses you give to the questions below. As the process is name-blind, this sheet with your name will be removed before leaders see your application. Once selected, we'll match your name to your application to contact you.

Name: _____

ID #: _____

Email: _____

Please read all statements below carefully and seriously. Sign to indicate your agreement.
Thank you!

COMMITMENT:

Being an Alternative Spring Break participant requires time, energy, and commitment. By signing this statement, I am agreeing to invest that time, energy and commitment if selected to be an ASB participant. I will attend all mandatory ASB events, including all group meetings.

Signature: _____ Date: _____

ASB POLICIES:

ASB participants are required to follow all ASB and College of Charleston policies before, during, and after their trip at any ASB event. By signing this statement, I am agreeing to follow, and uphold ASB and College of Charleston policies to the best of my abilities.

Signature: _____ Date: _____

SURVEYS and EVALUATIONS

All ASB participants will be asked to help us evaluate the program. The results will be kept confidential and will only be used for program feedback and improvement. By signing this statement, I am agreeing to participate in all ASB surveys and evaluations, and to give honest feedback.

Signature: _____ Date: _____

NON-REFUNDABLE PAYMENT POLICY

All students participating in ASB will make payments to go on their trip. These payments are a sign of commitment to the program and will not be refunded. If a participant has to drop out for any reason, all of their previously contributed money is non-refundable. In addition, if a flight has been purchased in your name you are responsible for the entire cost of that ticket. A hold will be placed on your account until full payment is received. By signing this statement, I am signifying that I understand the ASB non-refundable payment policy.

Signature: _____ Date: _____

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Participant Application: Questions

Personal Information

Class year:	
Gender:	
Have you been on an Alt Break trip in the past?:	
Are you 21, licensed, and willing to drive in the US?:	

Trip Preference:

Please rate your interest in each of the following trips (1 for first choice, 2 for second, etc.). If you are not interested in a particular trip, leave that line blank. If you are not selected by your first choice, your application will be reviewed by your second choice, third, etc.

- _____ Children and Education (Treasure Cove, Jamaica \$1,413)
- _____ Animal Rehabilitation (Petén, Guatemala \$1,400)
- _____ Agro-ecological Issues (San Isidro, Costa Rica, \$1,400)
- _____ Habitat for Humanity (Jacksonville, FL \$350)
- _____ Rural Healthcare and Social Injustice (Kentucky/Virginia, \$400)

The following trip is unconfirmed at this time; please indicate if you would be interested in going on this trip

- _____ Homelessness in our Nation's Capital (Washington, D.C. \$400)

Questions

Please answer the following questions on a separate page.

We are looking for serious, thoughtful answers. Your responses will be the basis for your selection in an Alternative Break trip.

- 1) Why are you interested in participating in the Alternative Break trip you noted as your first choice? What expectations do you have?
- 2) Describe a volunteer experience that was meaningful to you.
- 3) What extracurricular activities are you involved in?
- 4) What do you hope to gain from the AB experience?
- 5) Please provide any additional information that you think we would find useful during the selection process. (ex: Level of Spanish, Previous construction experience, subject specific tutoring, etc.)

Questions? Email volunteer@cofc.edu

Please attach your responses and submit your application to the
Community Service Center, Lightsey Room 203
by Friday October 24th, 2008