

Program Goals

1. Challenge understanding through new perspectives, paradigm shifts, and faith formation
2. Engage in cross-cultural learning about migration and peacebuilding issues
3. Offer an accredited and affordable international experiential-learning opportunity for young adults
4. Foster global awareness and an ethic of service
5. Develop transformative relationships with MCC partners and learn about MCC's approach to international development and peacebuilding

Travel Information

Full name: _____
(As it appears on your passport)

Birthdate: _____

Address: _____

Health Card Number: _____

Email: _____

Phone: _____

Emergency Contact Name: _____

Emergency Contact #: _____

Passport #: _____

Travel Insurance: _____

(Your passport must be valid for 6 months after the return
date of the trip. Please include a copy of your passport ID page)

Church: _____

Health Information

1) Please list any dietary concerns, allergies or other restrictions you have that need to be taken into consideration for international travel.

2) Please list any health concerns that could affect your trip.

3) Please list any medications you are currently taking that could affect your trip.

Personal References

Please list two references – (please, no immediate family).

Name: _____

Name: _____

Address: _____

Address: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Nature of relationship: _____

Nature of relationship: _____

Learning Tour Program Information (please answer on an attached sheet)

- 1) Which of the above program goals are you most interested in? Why?

- 2) Explain two qualities you have that will help you engage in positive cross-cultural experiences.

- 3) Participants (ages 18-25) of this learning tour will spend 3 weeks living and travelling together. What attracts you to this type of communal travel?

- 4) What is one concern you have about this learning tour?

- 5) What is one thing that excites you about this learning tour?

- 6) Are you planning to earn university credit through CMU for this program?

Connections & Tour Leadership (please answer on an attached sheet)

- 1) How would you like to be prepared for this experience prior to departure? How can we best help you?

- 2) How would you like to share about your experience when you return home? What tools would help you?

**Please sign and date this form and send to your provincial MCC office by March 3rd 2017.
(If you mail, please phone/email to let us know. Emailed applications are preferred).**

Date: _____

Signature: _____

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