

## INSTRUCTIONS FOR COMPLETING APPLICATION

# Congratulations on making the decision to apply for an amazing educational and once in a lifetime opportunity!

The application process can be confusing and time consuming. This guide is meant to lead you through the process and provide you with detailed instructions. There are several forms you will need to download from the web and complete before you will be considered for the program. Below is a list of forms, keep in mind; some may not apply to all applicants. **Read all the instructions prior to completing and submitting the forms**. At the end of these instructions, pay special attention to the submission deadline dates.

For any questions about the application process, resources, and contact information for MOTL, Western Region, visit www.motlthewest.org.

The information you provide will be kept strictly confidential. Please be thorough and honest. Double check all the information and phone numbers for accuracy before submitting completed forms. All application forms/documents must be submitted via email to application@motlthewest.org.

List of forms:*	

- Basic Application
- Personal Health History
- □□ Israel Visitor Form
- □□ Authorization/Signature Page\_
- □ Family Questionnaire

Other required documentation: \*

Photo (jpeg or gif file, passport photo or similar)
Copy of medical insurance card (jpeg, word, or gif)
Copy of passport (jpeg, word, or gif)

Documents to download and keep for your records: Packing List Release and Waiver of Liability Statement Code of Conduct

### Other:^

Letter of Recommendation

□□ Physician Statement

\* Download and save on your computer. Complete and email to application@motIthewest.org. Red box indicates mandatory answer; only completed applications will be accepted.

<sup>%</sup> Make sure you include your full name on every page of the documents and in the subject line of the email. ^ Letter of Recommendation needs to be completed by an educator, counselor, rabbi or other adult familiar with knowledge of your commitment to Jewish history, education, and community. Physician statement needs to be completed by your personal physician.

**Basic Application**: Answer all questions on the form<sup>#</sup>. **At all times use your full name as it appears on your passport**. <sup>#</sup>Passport information may be left blank and submitted once a current passport is available. Please do not submit expired passport information.

#### A further note about passports:

U.S. Citizens – Do not need visas. Israel requires the passport be current for 6 months following the trip. If your passport expires before December of the travel year, apply for a renewal immediately.

Israel & U.S. Citizens – Must carry Israel passport and enter Israel with that passport. You should also have a Ptor (exemption letter for Israel military duty). You will need to submit a scanned copy to application@motIthewest.org. Other passports – contact Western Region Director.

**Physician Statement**: Print and submit to your physician. Schedule your appointment as soon as possible. See below for due date. Return to MOTL Western Region via mail or scan and submit via email.

**Israel Visitor Form**: Only complete if you plan to have family/friends visit you while in Israel or you plan to leave the group with them. Note the visitation time is pre---arranged on the itinerary. MOTL Western Region staff must be aware of all teens that plan to have visits. If you don't submit a form ahead of time, you will not be allowed visitors and/or to leave the group at any time.

Packing List: This is a guide; pay special attention to items that are required and those that are not allowed.

Authorization/Signature Page: Print, sign and date every designated field and return via mail. Only original signatures will be accepted.

**Letter of Recommendation**: Print and submit to a teacher, principal, Rabbi, guidance counselor or youth advisor. The Letter must be returned directly to March of the Living Western Region via mail or email. Recommendations from friends or family members are not acceptable. It is recommended that you ask for a second copy of letter for your records.

Family Questionnaire: Complete only if you have a family connection to the Holocaust or Israel.

**Essay**: Write a short essay on "Why I would like to participate in the March of the Living." It should not exceed 500 words.

Again if you have any questions, you may contact your Program Coordinator. Visit www.motlthewest.org for contact info.

#### **Application Deadlines:**

Friday, November 25, 2016

- Basic Application
- Photo
- □ Authorization/Signature Page
- □ \$1,100 deposit

#### Friday, January 6, 2017

- Personal Health History
- Physician Statement
- Contact Page

Friday, January 20, 2017

- $\hfill\square$  Letter of Recommendation
- Essay
- Copy of Passport
- $\hfill\square$  Copy of medical insurance card

#### Friday, March 17, 2017

- Israel Visitor Form
- □ Family Questionnaire