



**CANYONS**  
SCHOOL DISTRICT  
A DECADE OF EDUCATIONAL EXCELLENCE  
1 0 Y E A R S

## Short-Term Foreign Exchange Agency Application

Please submit all information to Floyd Stensrud  
Director of Planning and Enrollment  
[floyd.stensrud@canyonsdistrict.org](mailto:floyd.stensrud@canyonsdistrict.org)

*As per policy this visit will only be 5 days in the requested school.*

Date Agency is requesting Short Term visit: \_\_\_\_\_

Number of students that will be visiting: \_\_\_\_\_

Agency requesting Short Term visit for \_\_\_\_\_ High School.

Agency requesting application: \_\_\_\_\_

Agency contact Person: \_\_\_\_\_

Agency contact Phone Number: \_\_\_\_\_

Local Rep. requesting visit: \_\_\_\_\_

Local Rep. contact Phone Number: \_\_\_\_\_

Are you a CSJET certified agency?    Yes    No

How many Chaperone's/shadow adults will be accompanying these students?

What Country are the students from : \_\_\_\_\_

Please provide proof of Insurance, immunizations, name, and address of host parents and a copy of your itinerary.

Applications approved by the Director of Planning and Enrollment will also require a meeting to finalize all documentation.

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Requesting Agency/Rep. Signature

Date

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Director of Planning and Enrollment Signature

Date