

Viticulture & Enology Trainee/Intern Application

This form must be completed in English and submitted to app@worldwidefarmers.org. Any misstatement on this form may result in disqualification from the Program. Please include the following documents with your completed application: passport, completed [Medical Statement](#), CV/résumé and/or diploma (if applicable), and job/internship offer (if applicable).

| | | | | | | | | | | |
|------------------------|-------------------------------|---------------------------------|--------------------------------|------------------|-----------|-------|--|-------|--|------|
| Family (Last) name(s) | | | | | | | | | | |
| Given (First) name(s) | | | | | | | | | | |
| Height | | meters | Weight | | kilograms | Age | | years | | |
| Gender: | <input type="checkbox"/> Male | <input type="checkbox"/> Female | <input type="checkbox"/> Other | Date of birth | | month | | day | | year |
| City of birth | | | | Country of birth | | | | | | |
| Country of citizenship | | | | | | | | | | |

| | | |
|-----------------------|------------------------------|-----------------------------|
| Do you smoke tobacco? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you drink alcohol? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you married? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Do you have children? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Postal address (to be used for shipment of visa documents)

| | | | |
|--------------|--|---------------|--|
| Phone number | | Email address | |
|--------------|--|---------------|--|

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LANGUAGES

United States law requires that you be able to speak and understand English in order to obtain a visa. By signing this application, you certify that you are able to communicate in English. **Please list any other languages you speak and indicate your proficiency:**

☐ Native

☐ Fluent

☐ Good

☐ Poor

☐ Native

☐ Fluent

☐ Good

☐ Poor

☐ Native

☐ Fluent

☐ Good

☐ Poor

TRAVEL EXPERIENCE

Please list countries you have visited, the year visited, and the length of your stay

Have you ever been issued a J-1 Visa? ☐ Yes ☐ No

If yes, please give the name of the program, program dates, and field of training

Have you ever participated in any other training or internship program? ☐ Yes ☐ No

If yes, please give the name of the program, field of training, country and dates of participation

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EDUCATION INFORMATION

Have you graduated from a college, university, or other post-secondary academic institution?

(Please include a copy of your diploma when submitting this application.)

☐ Yes, I graduated.

Degree

Field of study

Date received

☐ I am currently enrolled in a college, university, or other post-secondary academic institution.

Institution name

Field of study

Projected graduation date

☐ I attended a college, university, or other post-secondary academic institution but did not graduate.

Institution name

Field of study

Dates of enrollment

 to

☐ No, I have not attended a college, university, or other post-secondary academic institution.

DRIVING PERMITS

Do you have an International Driving Permit?

☐ Yes ☐ No

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DESIRED PLACEMENT CATEGORY

Please mark all that apply, numbering them in order of preference (1 being the most-desired category).

| | |
|--------------------------|---|
| <input type="checkbox"/> | Viticulture (harvest, growing, vineyard experience) |
| <input type="checkbox"/> | Enology (general winemaking) |
| <input type="checkbox"/> | Barrel/cellar duties |
| <input type="checkbox"/> | Lab analysis |
| <input type="checkbox"/> | Hospitality/tasting room duties |
| <input type="checkbox"/> | Other (<i>be specific</i>) <input type="text"/> |

CURRENT EMPLOYER OR SCHOOL

Name and contact information of your current employer or school (*if applicable*)

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EXPERIENCE AND SKILLS

Describe your practical experience in the wine industry. Please provide the following:

| Name of winery/location | Size and varietals | Dates employed | General duties | Supervisor/reference |
|-------------------------|--------------------|----------------|----------------|----------------------|
| | | | | |
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| | | | | |
| | | | | |

Do you have any special skills or abilities? What do you like to do in your spare time?
What are your hobbies?



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EMERGENCY CONTACT

Name

Relationship

Phone number

Email address

WORKING WITH WORLDWIDE FARMERS EXCHANGE

How did you hear about Worldwide Farmers Exchange?

Do you know anyone who has participated in a WFE Program?

How will this program benefit you when you return to your home country?

What do you hope to gain from the experience? *(Attach another sheet of paper if needed.)*

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I understand that if I do not already have a confirmed placement, a placement cannot be guaranteed by Worldwide Farmers Exchange. If a placement is confirmed, I will be sent a Training/Internship Placement Plan (DS-7002) describing the placement. I understand and agree to the following:

- If I am granted a visa, I will be charged a program fee by Worldwide Farmers Exchange. If the program fee is not paid, my program may be terminated.
- My placement will be with the host named on my DS-7002 for my entire exchange program.
- The U.S. State Department requires that I submit a report before the end of my program. If I do not submit this report, I may be disqualified.
- I have read the WFE Handbook and will follow the rules of the Program.
- By signing or typing my name in the Signature field below, I acknowledge that all of the information in my application is true and correct.

Signature

Date

Printed name