



LIVE. LEARN. LEAD ▶

## HOST FAMILY APPLICATION

### HOST MOTHER'S INFORMATION

Name:	Birth Year:
Occupation:	Email:
Cell Phone:	Work Phone:

### HOST FATHER'S INFORMATION

Name:	Birth Year:
Occupation:	Email:
Cell Phone:	Work Phone:

### FAMILY ADDRESS

Street:		
City:	State:	Zip:
Home Phone:		

### CHILDREN AND OTHER PEOPLE LIVING IN YOUR HOME:

Name	Birth Year	Age	Male/Female	Living at Home?
			M / F	Y / N
			M / F	Y / N
			M / F	Y / N
			M / F	Y / N

### FAMILY DETAILS:

Which best describes your annual household income:  Under \$40,000  Over \$40,000

Please list any special eating habits or special diet of your family:

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What is the frequency you have family dinners together (days per week)? \_\_\_\_\_

Where will your student have a quiet place to study?  Yes  No

## RELIGIOUS AFFILIATIONS:

Which best describes your annual household income:  Under \$40,000  Over \$40,000

Mother:	Father:	Children:			
Your family's religious involvement:	Very Active	Somewhat Active	None		
Your family's attends service:	None	Weekly	Bi-Weekly	Monthly	Holidays Only
Church Name and Address:					

Your family understands the exchange student has the right to decide if he/she will attend services with your family (unless it is required by the private school)  Yes  No

Have you ever hosted an exchange student?  Yes  No

If YES, what agency? \_\_\_\_\_

## SCHOOL TRANSPORTATION:

How far from the school do you live (in miles)?: \_\_\_\_\_

How much time do you expect the student to spend commuting to school (in minutes)? \_\_\_\_\_

What transportation method will be used?  Bus  Car  Walking

## FAMILY INFORMATION:

Tell us about your family's hobbies, interests and weekend activities:  
\_\_\_\_\_  
\_\_\_\_\_

Describe a typical weekday in your home:  
\_\_\_\_\_  
\_\_\_\_\_

Please give a brief description of each family member, including his or her interests, responsibilities etc:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## HOME ENVIRONMENT:

Do any members of the family smoke?    Yes    No

Describe your home and neighborhood:

Household pets or animals - specify number, breed, indoor/outdoor

What chores would your student be expected to do?

How much time do you expect to spend with the student on weekends?

What accommodations will you have for your student?    Own Bedroom    Shared Bedroom

If sharing, provide name and age of roommate:

Name:

Age:

## COMMUNITY:

Community Name:

Nearest Largest City:

Distance by Car (miles):

Population (approx.):

Select which best describe your home:    Urban    Rural    Suburban

Describe your community, city/town, geographic location:

What activities, cultural or recreational events are in or around your area?

## **PERSONAL REFERENCES (NON-FAMILY MEMBERS):**

Name:	Phone:
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Email:	
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Address:	
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City, State, Zip:	
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Name:	Phone:
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Email:	
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City, State, Zip:	
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Name:	Phone:
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Email:	
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Address:	
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City, State, Zip:	
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### **PHOTO CHECKLIST**

Please attach or email the following photos of your home:

- Front of the house
- Living room
- Kitchen area
- Student's bedroom
- Student's bathroom
- Family pictures

### **HOUSE RULES**

- We encourage each host family to create a set of house rules or family rules for the international student.
- Please explain the rules to your student and make sure he or she understands what is expected of him/her.
- Please include a preliminary draft of your house rules here so that the students will understand what might be expected of him/her

### **PLEASE WRITE A GREETING TO YOUR EXCHANGE STUDENT**