| host family Application |
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| Applicant Information |
| First Host Parent Name: |
| Current address: |
| City: | State: | ZIP Code: |
| E-mail:  | Home Phone number: | Cell number: |
| Second Host Parent Name: |
| E-mail:  | Home Phone number: | Cell number: |
| Employment and emergency contact Information |
| Occupation/Title/Employer |
| Business Conducted at home?  |
| Name/Address/Phone of person(not living with host family) to contact in case of emergency |
| host family’s children |
| Child Name: |
| Age | Gender | Live at Home? |
| Child Name: |
| Age | Gender | Live at Home? |
| Child Name: |
| Age | Gender | Live at Home? |
| Child Name: |
| Age | Gender | Live at Home? |
| Other people live at home: |
| Age | Gender | Relationship |
| Other people live at home: |
| Age | Gender | Relationship |
| others |
| List animals you have in your home or on your property:  |
| Is there anyone smoke at home? |
| Are you able to provide school transportation for the student? |
| Other means student may take to school: |
| experiences |
| **International Experience:** |
| **Hobbies/Community Activities:** |
| **Additional information you would like the student to know:** |
| **Gender of the student you prefer:** |
| Signatures |
| I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application. |
| Signature of applicant: | Date: |
| Signature of spouse  | Date: |