



HOST FAMILY APPLICATION

Please type or print legibly in black ink

June 2010

-----**THIS SECTION OFFICE USE ONLY**-----

Assigned Student: _____

Family Approved: () Yes () No

HOST FAMILY PROFILE

Father's Full Name: _____ Age: _____ Date of Birth: ____/____/____

Mother's Full Name: _____ Age: _____ Date of Birth: ____/____/____

Home Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

Father's Occupation: _____ Title: _____

Name of Employer: _____ Number of Years Employed: _____

Level of Education: High School () College 1 2 3 4 years B.A. () B.S. () Master () PH.D. ()

Business Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Ext. _____

Cell Phone: _____ Social Security #: _____

Mother's Occupation: _____ Title: _____

Name of Employer: _____ Number of Years Employed: _____

Level of Education: High School () College 1 2 3 4 years B.A. () B.S. () Master () PH.D. ()

Business Address: _____ City: _____

State: _____ Zip: _____ Phone: _____ Ext. _____

Cell Phone: _____ Social Security #: _____

Names of Children	Living at home:	Sex:	Age:	Date of Birth:
_____	() Yes () No	_____	_____	____/____/____
_____	() Yes () No	_____	_____	____/____/____
_____	() Yes () No	_____	_____	____/____/____
_____	() Yes () No	_____	_____	____/____/____
_____	() Yes () No	_____	_____	____/____/____
_____	() Yes () No	_____	_____	____/____/____

Names of others living at home: _____ Sex: _____ Age: _____ Date of Birth: ____/____/____

_____ Sex: _____ Age: _____ Date of Birth: ____/____/____

COMMUNITY PROFILE

- 1) How long have you lived at your present address? _____ () Own () Rent
- 2) Does your family live in: () House () Condo () Apartment () Ranch () Farm () Mobile Home
- 3) What is the population of your city? () Metropolitan (More than 1 million) () Urban (More than 50,000)
- () Suburban (Between 15,000 to 50,000) () Small Town (Between 2,500 to 15,000) () Rural (Less than 2,500)
- 4) Describe some points of interest in your surrounding community (museums, amusement parks, historic sites, monuments, natural resources, etc.). _____
- _____
- _____
- _____
- _____
- 5) List some activities or recreational facilities available in your neighborhood/community for a teenager. _____
- _____
- _____

LIFESTYLE QUESTIONNAIRE

- 6) Describe your family's lifestyle and outlook. _____
- _____
- _____
- 7) Describe typical weekdays and weekends in your home. _____
- _____
- _____
- 8) What opportunities will the student have for association with American teenagers? _____
- _____
- _____
- 9) Please circle some of your family's favorite activities and feel free to add additional activities not listed.
- | | | | | | |
|------------|--------------|-------------|------------|---------------|-------------|
| Sports | Volleyball | Camping | Museums | Entertainment | Watching TV |
| Football | Skating | Hunting | Theater | Video Games | Reading |
| Baseball | Swimming | Fishing | Ballet | Traveling | Music |
| Basketball | Tennis | Snow Sports | Singing | Eating Out | Car Shows |
| Soccer | Ice Skating | Arts | Opera | Playing Cards | _____ |
| Bicycling | Martial Arts | Painting | Crafts | Sports Events | _____ |
| Golf | Water Sports | Photography | Decorating | Movies | _____ |

HOST FAMILY INFORMATION

- 10) What is your church name and affiliation? _____
-
- 11) How often do you attend your church's services? Weekly Monthly Occasionally
- 12) Do you expect your international student to attend your church activities with your family? Yes No
- 13) Describe family meal times. _____
- 14) Have you hosted an international exchange student in the past? No Yes, when? _____
For how long? _____ Student's Name: _____ Student's home country? _____
For how long? _____ Student's Name: _____ Student's home country? _____
- 15) Does any member of your family speak a second language? No Yes
If so, who? _____ Which language? _____
-
- 16) Are all members of your family in agreement about hosting an international student? Yes No
- 17) Will your student share a bedroom? _____ If yes, with whom? _____
(The international student may share a bedroom, but he/she must have a bed of his/her own.)
- 18) Does anyone in your household smoke? _____ If yes, who? _____
- 19) Are there any pets in your household? No Yes Type _____ Outdoor Indoor
Type _____ Outdoor Indoor Type _____ Outdoor Indoor
- 20) List any musical instruments in your home which the international student might use: _____
-

21) How would you best describe your family unit? Please circle as many as apply:

- | | | | |
|---------------|------------------|---------------|----------------|
| Warm | Formal | Serious | Argumentative |
| Reserved | Strict | Indifferent | Outgoing |
| Demanding | Orderly | Tolerant | Ethical |
| Quiet | United | Relaxed | Funny |
| Sports-Minded | Christian Values | Lovely | Perfectionists |
| Disciplined | Open-minded | Understanding | Critical |
| Protective | Disorganized | Supportive | Flexible |
| Active | Conservative | Respectful | Optimistic |

PREFERENCES

22) Would you prefer to host a: Boy Girl Doesn't matter

Please justify your preference: _____

23) Please indicate the age preference for your exchange student below and justify your answer:

14/15 15/16 16/17 17/18 Doesn't matter

24) What personality traits would you prefer in your exchange student and why? _____

25) Preferred hosting period: Fall _____ → Academic year ____ or semester ____

Spring _____ → Academic semester

Doesn't matter

EXPECTATIONS

26) Why does your family wish to host an international exchange student? _____

27) What does your family expect to gain from this experience? _____

28) Do you have any concerns regarding the hosting of an international exchange student? Please explain: _____

29) What household and additional responsibilities do you expect from your exchange student? _____

30) What would be your international student's curfew? Weekdays: _____ Weekends: _____

HOST FAMILY BACKGROUND

31) Has anyone in your family ever been arrested or convicted for any offense other than a minor traffic violation?

() No () Yes, please explain: _____

32) Do any family members have a psychological or physical disability? () No () Yes, please explain: _____

33) Describe any health, allergy, or dietary needs/conditions in your family: _____

EMERGENCY CONTACT

34) Please provide *Dayton Christian School System* with an emergency contact outside of your home:

Name: _____ Relationship: _____

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____ Email: _____

REFERENCES

Please provide complete information for the following three references whom *Dayton Christian School System* may contact. Your application cannot be finalized without these three references. All information that we receive on the reference forms is kept confidential.

A) PERSONAL (not a relative)

Name: _____ Years acquainted: _____

Address: _____ Phone: _____

B) PROFESSIONAL

Name: _____ Title: _____

Address: _____ Phone: _____

C) CLERGY/OTHER

Name: _____ Years acquainted: _____

Address: _____ Phone: _____

AGREEMENT

We, the undersigned, hereby state the following:

- I/We certify that the information given on the pages of the “Host Family Application” is accurate and true and was completed to the best of my/our knowledge.
- Our family has been personally interviewed by a *Dayton Christian School System* representative.
- Our family will freely and willingly provide room and board to the international student.
- Our family agrees to provide the international student with a comfortable, nurturing and loving family environment.
- Our family agrees to ensure the international student attends weekly church services.
- Our family will be proud to share the American lifestyle and language with the international student.
- Our family will accept our international student as a member of the family and share family responsibilities.
- Our family’s reason for hosting an international student is solely based on our desire for cultural learning, understanding and sharing.
- Our family has agreed to host an international student without remuneration or any other source of financial compensation from DCSS.
- When necessary, our family will seek immediate medical attention for our international student.
- We understand that any medical expenses will be paid by the international student or his/her insurance.
- None of our family members have a history of criminal activity, drug/alcohol/substance/sexual abuse, or any other habitual behaviors that may endanger or jeopardize the international student’s experience.
- Our family has authorized *Dayton Christian School System* to perform a criminal background check and to check the references provided by us and/or other members of the community.
- Having reviewed this application, it is our family’s decision that we have the financial ability to host an international student.
- Our family understands that the international student must adhere to the *Dayton Christian School System* program rules and regulations at all times, and are willing to see those rules and regulations followed.
- Our family understands that any and all decisions made by *Dayton Christian School System* and any appropriate placement agency concerning the international student are final, including possible removal or transfer of the student.

Host Father: _____ Date: _____

Host Mother: _____ Date: _____

This application does not commit you to becoming a host family, nor does it confirm placement of a student in your home. Placement of a student in your home will also be contingent on approval of enrollment by Dayton Christian School System.

Feel free to contact us with any questions at any time. Please mail the “Host Family Application” package to:

**Dayton Christian School System
International Student Program Director
9391 Washington Church Road
Miamisburg, OH 45342**

www.daytonchristian.com * (937) 291-7210