



# Academic Foundation *for* International Cultural Exchange

7242 La Jolla Blvd, La Jolla, CA 92037  
Telephone: (858) 455-0302 Fax: (858) 455-0335

## STUDENT CONTACT SHEET

**for the month of APRIL (due by Apr 15)**

Student Name \_\_\_\_\_ Community Rep Name \_\_\_\_\_

Host Family Name \_\_\_\_\_ Date of Contact \_\_\_\_\_

Nationality/State \_\_\_\_\_ By Phone or In Person \_\_\_\_\_

1. Have you seen a copy of the student's third quarter grades? \_\_\_\_\_ How were they? \_\_\_\_\_

2. Did the student attend the Spring AFICE trip? \_\_\_\_\_ Comments: \_\_\_\_\_

3. Is the student attending any other school activity or special event? \_\_\_\_\_

4. Is the student satisfied with their year so far? \_\_\_\_\_

5. Is the student's natural parents planning a visit at the end of the school year? \_\_\_\_\_

6. Is the student planning on traveling with host family, natural parents, relatives or other responsible adult at the end of the year? \_\_\_\_\_  
\_\_\_\_\_ If yes, have all the necessary "Travel After Program" release forms been submitted to the AFICE National Office?

*\*\*It is important to remind students that if they are planning on this type of travel, all forms are due by April 15<sup>th</sup>, requests made after this date will not be accepted.*

General Comments: \_\_\_\_\_

Signature of Community Representative \_\_\_\_\_ Date Submitted \_\_\_\_\_

**\*\*Community Representative must send this form to the AFICE National Office by the date indicated above.**



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## HOST FAMILY CONTACT SHEET

**for the month of APRIL (due by Apr 15)**

Host Family Name \_\_\_\_\_ Community Rep Name \_\_\_\_\_

Student Name \_\_\_\_\_ Date of Contact \_\_\_\_\_

Nationality/State \_\_\_\_\_ By Phone or In Person \_\_\_\_\_

1. Has the host parents been in contact with the school? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

2. Is the host family satisfied with the year so far? \_\_\_\_\_ If not, please explain: \_\_\_\_\_

\_\_\_\_\_

3. Has the student informed the host family of their natural parents visiting? \_\_\_\_\_

\_\_\_\_\_

4. Does the host family have plans to travel with their student at the end of the year? \_\_\_\_\_ If yes, have all the necessary  
"Travel After Program" release forms been submitted to the AFICE National Office? \_\_\_\_\_

\_\_\_\_\_

*\*\*It is important to remind students that if they are planning on this type of travel, all forms are due by April 15<sup>th</sup>, requests made after this date will not be accepted*

General Comments: \_\_\_\_\_

\_\_\_\_\_

Signature of Community Representative \_\_\_\_\_ Date Submitted \_\_\_\_\_

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## SCHOOL CONTACT SHEET

**for the month of April (due by Apr 15)**

School Name \_\_\_\_\_ Community Rep Name \_\_\_\_\_

Person Contacted \_\_\_\_\_ Date of Contact \_\_\_\_\_

Student Name \_\_\_\_\_ By Phone or In Person \_\_\_\_\_

Nationality/State \_\_\_\_\_

1. Has the school had any kind of contact with the host parents? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

2. Is the school satisfied with the year so far? \_\_\_\_\_ If not, please explain: \_\_\_\_\_

\_\_\_\_\_

3. If the student has a D or F, has the teacher been contacted to try and resolve the problems? \_\_\_\_\_

\_\_\_\_\_

Should a fax be sent to put the student on academic probation? \_\_\_\_\_ Should a Certificate of Academic Excellence be sent from the AFICE National Office to praise the student for high academics? \_\_\_\_\_

\_\_\_\_\_

4. Has the student's involvement with the school been satisfactory? \_\_\_\_\_

\_\_\_\_\_

General Comments: \_\_\_\_\_

\_\_\_\_\_

Signature of Community Representative \_\_\_\_\_ Date Submitted \_\_\_\_\_

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