



A non-profit tax-exempt educational foundation

Academic Foundation *for* International Cultural Exchange

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

JUNE CONTACT SHEET

(due by student's return)

Student Name _____ Community Rep Name _____

Host Family Name _____ Date of Student Contact _____

School Name _____ Date of Host Family Contact _____

Nationality/State _____ Date of School Contact _____

1. Did student attend a local farewell party? _____

2. Were there any problems with the student's departure? _____

3. What were the host family's feelings about this experience? _____

4. Would you recommend that this host family host again? _____

5. Have you spoken to host family about next year? _____

6. Was the school satisfied with this experience? _____ Have you spoken to the school about next year? _____

When is the earliest date to contact them about securing a "slot" for next year? _____

FINAL ASSESSMENT

How was the student's relationship to the American lifestyle?

Excellent Good Fair Poor

How was the student's relationship to the American high school?

Excellent Good Fair Poor

How was the student's relationship to the host family?

Excellent Good Fair Poor

How was the student's relationship to the Community Representative?

Excellent Good Fair Poor

Signature of Community Representative _____ Date Submitted _____

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