7242 La Jolla Blvd La Jolla, California 92037 www.afice.org



## HOST FAMILY VISIT/ INTERVIEW FORM PAGE 1

Host Family's Name

| Last   |                          | First                 |                |      |
|--|--------------------------|-----------------------|----------------|------|
| Questions to be asked during Host Family Interview (**         | *Must be performe        | d with all family mer | nbers present, | )    |
| Why are you interested in the idea of hosting a student? _     |                          |                       |                |      |
|  |                          |                       |                |      |
| How much time have you spent discussing the possibility        | of hosting?              |                       |                |      |
|  |                          |                       |                |      |
| What can you offer as a host family to an exchange stude       | ent?                     |                       |                |      |
|  |                          |                       |                |      |
| What do you hope to gain from this experience?                 |                          |                       |                |      |
|  |                          |                       |                |      |
| What do you think the most difficult adjustment to having      | a new family mem         | ber will be?          |                |      |
|  | ,                        |                       |                |      |
| How do you think your children (if applicable) will relate to  | a teenager living        | in your home?         |                |      |
|  |                          |                       |                |      |
| How do you plan to overcome any problems or misunders          | standings that aris      | e?                    |                |      |
|  |                          |                       |                |      |
|  |                          |                       |                |      |
| Are you willing to see to it that your student participates in | extra curricular a       | ctivities?            |                |      |
|  |                          |                       |                |      |
| Do you feel that you have adequate financial resources to      | o undertake hostir       | ng a student?         |                |      |
| Signature of Community Representative                          |                          |                       |                |      |
|  |                          |                       |                |      |
| AFICE Community Representative (type or print)                 |                          |                       |                |      |
| Date / /   | Signature of Host Parent |                       |                |      |
| Month Day Year   | Date                     | /_<br>Month           | _/             | _    |
|  |                          | Month                 | Day            | Year |

State

This copy sent by Community Representative to the AFICE National Office

City

Telephone (858) 455-0302

Fax: (858) 455-0335

## **HOST FAMILY VISIT/INTERVIEW FORM - PAGE 2**

| Host Family's Name  |                                    |   |  |  |
|---|------------------------------------|---|--|--|
|   | Last                               | First                                     |  |  |
| Address   |                                    |   |  |  |
| Street  |                                    |   |  |  |
| City  | State                              | Zip Code                                  |  |  |
| Host Family Visit Screening To be completed by Community Repres | entative after visit               |   |  |  |
| Description of Neighborhood (i.e                                | ., big city, suburb, small town, e | etc. plus comments)                       |  |  |
|   |                                    |   |  |  |
| Type and Size of Home/Number                                    | of Bedrooms (i.e., Single family   | home, townhome, farm, etc. plus comments) |  |  |
|   |                                    |   |  |  |
|   |                                    |   |  |  |
| Exterior Condition of Home                                      |                                    |   |  |  |
|   |                                    |   |  |  |
|   |                                    |   |  |  |
| Interior Condition of Home (i.e., 0                             | Clean and well-kept, untidy, etc   | . plus comments)                          |  |  |
|   |                                    |   |  |  |
|   |                                    |   |  |  |
| Student's Bedroom   |                                    |   |  |  |
| Student's Study Area  |                                    |   |  |  |
| Overall Impression of Family                                    |                                    |   |  |  |
|   |                                    |   |  |  |
| Signature of Community I  | Representative                     |   |  |  |
| AFICE Community Represen  | tative (type or print)             |   |  |  |
| Date//<br>Month Day   | Year                               |   |  |  |
| City  | <br>State                          |   |  |  |