

International Friendship Program Host Application

Date:		
HOST NAME(S)		
Last Name	First Name	<input type="checkbox"/> Male <input type="checkbox"/> Female
Occupation (<i>If retired, previous occupation</i>)		Work Phone
Last Name	First Name	<input type="checkbox"/> Male <input type="checkbox"/> Female
Occupation (<i>If retired, previous occupation</i>)		Work Phone
HOME ADDRESS		
Street	City	Zip
Email		Home Phone
CHILDREN		
Boys' Names and Ages		
Girls' Names and Ages		
AFFILIATIONS AND INTERESTS		
Community Affiliations (<i>Church, Civic Groups, etc.</i>)		
Hobbies or Family Interests		
HOST HISTORY		
<ul style="list-style-type: none"> • Have you hosted student before? <input type="checkbox"/> No <input type="checkbox"/> Yes <i>If YES, list which years:.....</i> • Are you willing to host 2 students for the academic year? <input type="checkbox"/> No <input type="checkbox"/> Yes OR <input type="checkbox"/> Call me first to verify • Are you interested in serving on the International Friendship Program Committee which helps to administer the program (matching, host recruitment, social functions)? <input type="checkbox"/> No <input type="checkbox"/> Yes 		
STUDENT PREFERENCE		
<i>We try to accommodate your preferences, but because a student profile may not match your request, it is not always possible.</i>		
<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Graduate	<input type="checkbox"/> No Preference
<input type="checkbox"/> Single Male	<input type="checkbox"/> Single Female	<input type="checkbox"/> No Preference
<input type="checkbox"/> Married with children	<input type="checkbox"/> Married without children	<input type="checkbox"/> No Preference
Are you willing to take a student who does not meet your preferences? <input type="checkbox"/> No <input type="checkbox"/> Yes		
COMMENTS		
How did you hear about the International Friendship Program?		

Additional Comments: