



SPIRAL Host Family Application

Family Contact Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____

Email: _____

Emergency contact number: _____

Family Members

Please list first and last names of all household members, along with age, gender, and profession.

Living Environment Information

Pets:	<input type="checkbox"/> Cats	<input type="checkbox"/> Dogs	<input type="checkbox"/> Other pets:
Family:	<input type="checkbox"/> With children	<input type="checkbox"/> With Teenagers	<input type="checkbox"/> Adults only <input type="checkbox"/> Other
Smoking:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Dietary preference:	<input type="checkbox"/> All foods	<input type="checkbox"/> Vegetarian	<input type="checkbox"/> Other:

Please describe your family's interests and hobbies:

Have any of your family members lived or traveled abroad? If so, what countries?

Please describe any other hosting experiences your family has had:

What kind of sleeping and bathroom arrangements would you make for the student?

Are you willing to provide transportation to and from the school that the home stay student will attend?

Are you willing to arrange occasional cultural and recreational activities for your home stay student on evenings and weekends? If so, what kind of activities would you arrange?

Are you willing to go through the background and reference check process?

Please provide names of two references:

Name	E-Mail	Phone Number	Relationship

Thank you for considering opening your home to a student, and for taking the time to complete this application. We will do our best to match your family with a student based on the information you have provided. Should you have any questions or concerns, please do not hesitate to contact us.

Declaration

I certify that the above information is true and complete. I understand that any false or incomplete information submitted in support of my application may invalidate my application and result in consequences that are fully my responsibility.

Applicant's name, please print: _____

Applicant's signature: _____ Date _____