



Student: _____ ID#: _____

Area Representative: _____

High School: _____

Application for Prospective Host Families

(Please type or print with a blue or black ballpoint pen.)

Host Family's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (_____) _____ E-mail: _____

Host Father's Cell Phone: (_____) _____ Host Mother's Cell Phone: (_____) _____

Is this residence the site of a functioning business (i.e., daycare, farm, etc.)? Yes No

If yes, please explain: _____

Person to Contact in Case of an Emergency (Must be someone that does NOT live in your home.)

Name: _____ Relationship: _____

Phone: (_____) _____ E-mail: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Host Father's Full Name: _____ Date of Birth: ____/____/____

Level of Education Achieved: High School B.A./B.S. M.A./M.S.
 Ph.D. Vocational Military

Employer's Name: _____ Job Title: _____

Business Address: _____

City: _____ State: _____ Zip: _____ Phone: (_____) _____

No. of Years with Current Employer: _____ Working Hours: _____

Host Mother's Full Name: _____ Date of Birth: ____/____/____

Level of Education Achieved: High School B.A./B.S. M.A./M.S.
 Ph.D. Vocational Military

Employer's Name: _____ Job Title: _____

Business Address: _____

City: _____ State: _____ Zip: _____ Phone: (_____) _____

No. of Years with Current Employer: _____ Working Hours: _____

How many family members are living at home (either part-time or full-time), including parents? _____

Name	Gender	Date of Birth	Age	Full or Part-Time?
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____

Other Person(s) in Home	Gender	Date of Birth	Full or Part-Time?	Relationship to Family
_____	_____	____/____/____	_____	_____
_____	_____	____/____/____	_____	_____

1. How long have you lived at the present address? _____

2. Type of home: Single family home Condominium Duplex Apartment Mobile Home

Number of Bedrooms: _____ Number of Bathrooms: _____ Please list any amenities that would be available to the student (i.e., swimming pool, exercise equipment, computer, etc.): _____

Utilities: Electric Natural Gas Propane Septic Tank Sewer Well Water City Water

3. Do you reside on a military base or Indian Reservation? _____

4. Please give a brief description of your neighborhood and community. _____

5. Is there public transportation available in your area? _____ If so, what kind? _____

6. What is the approximate population of your community? _____

7. How would you describe your community? Urban Suburban Small Town Rural

8. What is your city, town or community's website? _____

9. What points of interest are near your home (i.e., parks, museums, historical sites, etc.)? _____

10. Are there any areas in or near your neighborhood that you feel the student should avoid? Yes No

If so, please explain. _____

11. What is the nearest major city? _____ How far is it from your home? _____

What is the city's approximate population? _____

12. What is the nearest airport? _____ How far is it from your home? _____

13. Which school would the student attend? _____

Principal's Name: _____ Counselor's Name: _____

Phone: (____) _____ Fax: (____) _____ E-mail: _____

Address: _____

City: _____ State: _____ Zip Code: _____

High School Population: Less than 500 students 500 – 1,000 students More than 1,000 students

14. How far is the high school from your home? _____

How will your student get to and from school? _____

15. What is the school's approximate start date? _____ Approximate end date? _____

16. Please provide a description of the high school (activities offered to students, campus description, student body, etc.)

17. Please list some activities that are available to teenagers in your community. _____

HOST FAMILY ACTIVITIES & INTERESTS:

Please circle any activities that your family participates in on a regular basis and include the name of the family member who participates in each activity.

Activity	Family Member(s)	Activity	Family Member(s)	Activity	Family Member(s)
Aerobics		Cycling		Rollerblading	
Archery		Dancing		Sailing	
Arts & Crafts		Fishing		School Clubs	
Astronomy		Football		Sewing	
Auto Mechanics		Gardening		Skateboarding	
Auto Racing		Golf		Skiing/Snowboarding	
Baseball		Gymnastics		Soccer	
Basketball		Hiking		Surfing	
Billiards/Pool		Hockey		Swimming	
Boating		Horseback Riding		Table Tennis/Ping Pong	
Bowling		Hunting		Tennis	
Camping		Ice Skating		Theater/Drama	
Card/Board Games		Martial Arts		Track/Running	
Chess		Museums		Video/Computer Games	
Classical Music		Photography		Volleyball	
Computers		Racquetball		Water Skiing	
Cooking		Reading		Windsurfing	

18. Please list any additional activities that your family may participate in that are not included on the list above. _____

19. Does any member of your family participate in volunteer activities within the community? _____

If so, please explain. _____

20. Please give a description of each family member's personality.

21. Does any member of your family play a musical instrument? _____ If so, please describe. _____

List musical instruments available in your home, if any. _____

22. What kind of music does your family listen to? _____

23. Do you have any pets in your household? _____ If so, please list how many and provide a brief description (i.e., cat, dog, fish, etc.). _____

Are pets kept primarily inside or outside of the home or both? _____

24. Do any members of your family smoke? _____ If so, who? _____

Do they smoke inside or outside of the home or both? _____

25. Are you willing to inform the exchange student in advance of the religious affiliation of any members of your household?

Yes No If yes, what is your family's religious affiliation? _____

Please describe your family's religious beliefs. Not Strong Average Strong

Would you like for your international student to attend religious services/activities with you on a regular basis?

Yes No If so, how often? _____

26. Would any members of your household have difficulty hosting a student whose religious beliefs are different from their own?

Yes No Comments: _____

27. Have you ever hosted an international student before? Yes No If so, when and for how long? _____

What was the student's nationality? _____

Through what organization did he/she come to the U.S.? _____

28. What is the primary language spoken in your home? _____

Is any member of your family fluent in another language? Yes No

If yes, please elaborate. _____

29. What is your family's combined annual income? *(The income data collected will be used solely for the purposes of ensuring that the basic needs of the exchange student can be met, including three quality meals and transportation to and from school activities.)*

Less than \$25,000 \$25,000 - \$35,000 \$35,000 - \$45,000 \$45,000 - \$55,000

\$55,000 - \$65,000 \$65,000 - \$75,000 \$75,000 and above

30. Does anyone in the home receive any kind of public assistance (financial needs-based government subsidies for food or housing)? Yes No If so, please explain: _____

31. Has your family ever had any contact with Child Protective Services in the past? Yes No If so, please explain. _____

32. How did you learn about our cultural exchange program?

- Area Representative Church Bulletin Friend Former Host Family
 Newspaper Ad/Article Poster/Brochure Other _____ (Please describe)

33. Describe any concerns you may have about hosting an international student.

34. How do your children feel about welcoming an international exchange student into their home?

35. Please describe a typical weekday in your household and give a brief description of your family's lifestyle.

36. Why do you want to host an exchange student? What do you think your family will gain from a cultural exchange, and how will it benefit the exchange student?

37. Please list some activities that would help you share your culture with an international student.

38. Please describe your expectations regarding the responsibilities and behavior of the student while he/she is in your home. (i.e., completion of homework, household chores, curfew on school nights and weekends, household rules, computer/internet usage, etc.)

39. Does anyone in your family have a physical or psychological disability/illness? Yes No

If yes, please describe. _____

40. Does anyone in your family have any special dietary practices or restrictions? Yes No

If yes, please describe. _____

41. Would you expect your student to follow any specific dietary restrictions? Yes No

If yes, please explain. _____

42. Would you feel comfortable hosting a student who follows a particular dietary restriction (i.e., vegetarian, no red meat, etc.)?

Yes No Comments: _____

43. Please describe your family's dietary habits. _____

We prepare and eat the majority of our meals at home. We eat in restaurants on a regular basis (almost every day).

We eat out once a week. We eat out once a month. We rarely eat in restaurants.

44. Is your family willing to provide special transportation so that the student may participate in extracurricular activities either after school, in the evenings or on weekends? Yes No Comments: _____

45. Which, if any, of your children presently attend the school in which the international student will be enrolled? If applicable, list any sports, clubs, activities, etc. that your children participate in at the school. _____

46. Does any member of your household work or volunteer for the high school in a coaching, teaching or administrative capacity?

Yes No If so, please explain: _____

47. Has any member of your household had contact with a coach regarding the hosting of an exchange student with a particular athletic ability? Yes No If so, please describe the contact and name the sport. _____

48. Give a brief description of the climate in your area. What is the appropriate clothing for the student to bring?

HOSTING PREFERENCES:

- 1) Gender Preference: Male Female Doesn't Matter
2) Age Preference: 15 16 17 18 Doesn't Matter
3) Student's Length of Stay One semester Academic Year (August - June) Calendar Year (January - December)

4) What personality traits do you prefer (i.e., quiet, outgoing, active)?

5) Please list any other preferences that you might have in regards to the student.

6) It is mandatory that the student have his/her own bed; however, he/she may share a bedroom with a host sibling of the same gender who is 12 years or older. The student may share a bedroom with no more than one other person. The student must also have a place where he/she can store his/her clothing and personal belongings.

Will the student have his/her own bedroom? Yes No

If not, with whom will he/she share a bedroom? _____

Will the student's room have a place for him/her to study? Yes No If not, where will he/she study? _____

REFERENCES

Please provide us with a minimum of three references. It is preferable to use persons that you have known for at least three years. **You may NOT use relatives or an OCEAN representative as a reference.**

Reference #1:

Name:	Relationship:	# of Years Known:
Address:		
City:	State:	Zip Code:
Phone:	E-mail:	

Reference #2:

Name:	Relationship:	# of Years Known:
Address:		
City:	State:	Zip Code:
Phone:	E-mail:	

Reference #3:

Name:	Relationship:	# of Years Known:
Address:		
City:	State:	Zip Code:
Phone:	E-mail:	

Reference #4:

Name:	Relationship:	# of Years Known:
Address:		
City:	State:	Zip Code:
Phone:	E-mail:	

Reference #5:

Name:	Relationship:	# of Years Known:
Address:		
City:	State:	Zip Code:
Phone:	E-mail:	

REQUIRED ONLY FOR A SINGLE HOST PARENT WHO HAS NO CHILDREN AT HOME: Please provide us with the contact information for two friends and/or family members who live nearby who are able to provide the student with an additional support network for the duration of his/her stay in your home.

1st Friend/Family Member: _____ Phone: (_____) _____

Address: _____ E-mail: _____

City: _____ State: _____ Zip: _____

2nd Friend/Family Member: _____ Phone: (_____) _____

Address: _____ E-mail: _____

City: _____ State: _____ Zip: _____

Please answer the following questions.

Has your family been personally interviewed by an OCEAN representative?

Yes No If not, has the area representative scheduled an in-home interview with your family? Yes No

Please provide details: _____

Does your family agree to provide a loving environment and expect your new son/daughter to accept responsibilities as a true member of your family? Yes No

Will your family freely and willingly provide the student with room and board? This includes providing the student with his/her own bed, as well as three square meals. Yes No (The student is responsible for his/her personal expenses, such as clothing, haircuts, personal hygiene items, school supplies/fees, etc.)

Does your family agree to host a student without remuneration or any other sort of financial compensation? Yes No

Does your family agree to maintain a separate bank account and to not loan money to or accept loans from the student?
 Yes No

Do any members of your family or persons directly related to your family have a history of drug/alcohol/substance/sexual abuse, or any other habitual behavior that may endanger or jeopardize the student's experience in any way? Yes No

Has any member of your household ever been charged with a crime? Yes No Have any members of your family or persons directly related to your family been convicted of a felony or misdemeanor? Yes No If you answered "yes" to any of the three previous questions, please explain. _____

Has your area representative scheduled an orientation meeting with your family prior to the student's arrival?

Yes No If so, when? _____

If not, please explain. _____

We/I authorize OCEAN to use our/my photographs without remuneration or any other sort of financial compensation. These photographs will be used to promote and publicize the organization's programs through brochures, posters, newsletters, newspapers, websites, Internet, etc. Yes No (* Please note that OCEAN will not use the photos of your home that were submitted with your application in any of its promotional materials.)

We/I certify that the interest we/I have in hosting an international student is for a purely cultural experience, and that we/I have no other motives. This application has been completed with the knowledge of all family members, and is true to the best of our/my ability. In addition, we/I agree to notify OCEAN if there are any significant changes to our/my initial application (i.e., relocation, new members to the household, change in contact information, etc.). **Furthermore, we/I agree to abide by all of OCEAN's rules and regulations. Under no circumstances whatsoever will we/I interfere with OCEAN's disciplinary actions or decisions regarding the status of our/my student.**

Host Father's Signature: _____ Date: _____

Host Mother's Signature: _____ Date: _____

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For Main Office Use Only:

I, _____, having reviewed this application, certify that this family is compatible to our ideals and philosophy and may serve as a host family.

Director's Signature: _____ Date: _____



Host Family Photos

The U.S. Department of State requires that we receive photos of each of our host families and their homes. Please e-mail or mail the following photos to our main office in Arizona.

1. Photos of the entire family, including pets.
2. Living area (living room/family room, etc.)
3. Kitchen and dining areas
4. Student's bedroom & bathroom
5. Front of home
6. Front and backyard

Please e-mail your photos to: info@ocean-intl.org

You may also mail these items to our main office:

OCEAN
2101 E. Broadway Road, Suite 4
Tempe, AZ 85282-1735

Thank you for applying to host one of our international exchange students!