



# Host Family Application and Profile

Date: \_\_\_\_\_

Center: \_\_\_\_\_

Host #1:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Gender: M or F      Year of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

Host #2:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Gender: M or F      Year of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

Please list the names of everyone else living in the household, their relationship to the Host(s) [i.e. daughter, son, roommate, etc.], and their year of birth.

Name	Relationship to Host	Male/Female	Year of Birth	Occupation

Address:

\_\_\_\_\_

\_\_\_\_\_

Home Telephone #: ( ) \_\_\_\_\_ Cell#: ( ) \_\_\_\_\_

Work#: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

How many available rooms do you have? \_\_\_\_\_ How many beds? \_\_\_\_\_

What is the minimum age of a student that you will host? \_\_\_\_\_

Do you prefer a male or female student? \_\_\_\_\_

Do you smoke? Yes \_\_\_\_\_ No \_\_\_\_\_

Is smoking permitted in the home? Yes \_\_\_\_\_ No \_\_\_\_\_ Outdoors Only \_\_\_\_\_

Will you host a student who drinks alcohol? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you permit alcohol in your home? Yes \_\_\_\_\_ No \_\_\_\_\_

Pets: Dog(s) \_\_\_\_\_ Indoor or Outdoor      Cat(s) \_\_\_\_\_ Indoor or Outdoor

Additional pet information: \_\_\_\_\_

Travel time from the host's home to the ELS Center: \_\_\_\_\_

Students will travel to and from the ELS Center by: \_\_\_\_\_

What are your hobbies and interests? \_\_\_\_\_

Will the student have Internet access in your home? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, what type (high speed, wireless, dial-up)? \_\_\_\_\_

Is there a private bathroom available for the student? \_\_\_\_\_

What is the size of the bed in the student's room? \_\_\_\_\_

Will laundry facilities be available? \_\_\_\_\_ If yes, where? \_\_\_\_\_

List any other facilities that will be available for the student to use: \_\_\_\_\_

Do you have any religious beliefs/practices you would like the student to be aware of? If yes, please specify: \_\_\_\_\_

Do the meals you will serve reflect any special dietary restrictions (i.e. Kosher, vegetarian, etc.)? If yes, please specify: \_\_\_\_\_

Do you have a preference to the length of the student's stay (short term: 1-3 weeks, intermediate: 1-3 months, long term: 4-12 months)? \_\_\_\_\_

Do you have preferences as to the student's language group or nationality? If yes, please specify: \_\_\_\_\_

What is your native language? \_\_\_\_\_

Are there any other languages spoken in your home? If yes, please specify: \_\_\_\_\_

How much time are you willing to interact with the student (how often are you at home, what is your work schedule like, what kind of things would you do with the student, etc.)? Would your ideal hosting experience involve a student who was like a "member of the family" or would you prefer less involvement?

**Thank you for participating in the ELS Language Centers Homestay Program!**