

Host Family Application

This document is a pdf form and can be completed electronically and saved, or printed and filled out by hand.

FAMILY

| family last name | | | | rent/relative at another address w ime during the stay? | No No |
|---|------------------|--------------|--|--|----------------|
| street address | | | Should this person receive arrival departure information, to | | |
| ity | state zip cod | 9 | - les [| 140 | |
| | state Zip cou | | name | | |
| ome phone | | | street address | | |
| tatus of parent(s) at this address: | | | | | |
| Married Separated | Remarrie | ed | city | state | zip code |
| ☐ Divorced ☐ Single | ☐ Widowe | d | phone | | |
| Shared household | | | cell phone | | |
| Parent(s)/stepparent(s)/guardian(s) | living at above | address: | | | |
| l. | | J 0-311 W. W | 2. | | |
| name | | | name | | |
| employer | | | employer | | |
| occupation | | | occupation | | |
| work phone | | | work phone | | |
| cell phone | | | cell phone | | |
| email | | | email | | |
| Cilian | | | eman | | |
| relationship to host child(ren) Names of children (please "*" hostin | ng child(ren) | | relationship to ho | st child(ren) | |
| name | sex . | | birthday (m/d/y) | name of school or occupation | living at home |
| ianie | SCX | age | birthday (m/d/y) | name of school of occupation | nving at nome |
| | | | | | |
| | | - | - | - | |
| | | | | | |
| | | | | | |
| REFERENCES | | | | | |
| ······································ | | | | | |
| Family Friend, Neighbor, Teacher, C | Clergy, etc. (no | relation | please) | | |
| ame | phone | | email | relationship | |
| | | | | | |
| ame | phone | | email | relationship | |
| | | | | | |
| | | | | | |

HOSTING INFORMATION

The three pillars of our program are: English language immersion, American cultural immersion, and the opportunity to develop international friendships.

| How did you hear about this opportunity? | If yes, will the student have something to do during this time (Spend time with other siblings, parents, neighbors, participate with working child, community program, etc) | | |
|---|---|--|--|
| Are there any other languages besides English spoken at home? Yes No No 1f so, which? | Will there be others (not listed on previous page) staying in your home during the student's stay? Yes No (Another foreign visitor, family member, roommate, etc.) | | |
| Will there be an adult home during the day? ☐ Yes ☐ No | It is not necessary to have a separate room, but a separate bed in a non-common area (ex: living room) is required. what type of arrangement is available in your home? | | |
| Will the hosting child(ren) be working? ☐ Yes ☐ No | - | | |
| Hours per week: Time of day: | | | |
| note the name after the activity. This helps us in our el | If only one member of the family participates in an activity, please forts to make appropriate matches between family and student interests. | | |
| Swimming Bicycling Hiking Water Sports: Jogging Gymnastics Other Sport: Camping Hockey Horse-riding Baseball/Softball Cooking Baseball/Softball Shopping Basketball Photography Volleyball Chess Soccer History How would you describe your family Quiet Active Outgoing Independent Cleother: What adjectives would you use to describe the host chief. | The second of | | |
| Do you live in a: check all that apply Small town City Suburb Rural Area Single Family Home Town Home Apartment Mobile Home Duplex/Fourplex Do you have any pets/animals? What kinds? | Have you ever hosted a foreign student? Yes No Which country How long? Have you ever traveled overseas? Yes No Which country How long? | | |
| Do you have any specific ideas of what you would like | 675 W.C. (1970) | | |

we indicate that our entire family is in agreement to have a prother/sister, son/adugnter from overseds this summer.

* Please include a picture of your family with the application so our program leader can recognize you upon arrival.

Parent signature date

According to Ley Orgánica 15/1999, on the Protection of Personal Data, we inform you that your personal data will be used in order to maintain the contractual relationship between the organization and the host family and the agreements derived from the contract. By signing this form, you grant your express consent to the processing of your family's health and religious information with the purpose of valuing your request to host and student assignment. For exercising your rights to access, correct, or cancel your data, please contact Let's Boston, Historiador Juan Uría, 4. 5°L. 33011 Oviedo - Asturias. Spain.

PARENTAL CONSENT FORM FOR USE OF IMAGES OF HOST FAMILY MEMBERS

| We | | the parent(s)/guardian(s) of: | |
|--|---|--|-----------|
| nild's full name | | child's full name | |
| aild's full name | | child's full name | |
| | n named about the named about | | |
| gnature | Date | Signature | Date |
| RIMINAL BACKGROUND CHECK | | | |
| | | l information is strictly confidential and will never b | e shared. |
| = | | Adult #2 Criminal Background Check Inform | |
| me | | Adult #2 Criminal Background Check Inform | |
| me iases: maiden name, other married name | | Adult #2 Criminal Background Check Inform | |
| ases: maiden name, other married name | nation | name aliases: maiden name, other married name | ation |
| me fases: maiden name, other married name reet address ty state | nation | Adult #2 Criminal Background Check Information name aliases: maiden name, other married name street address | ation |
| ame liases: maiden name, other married name reet address ity state rimary phone irth date | nation | name aliases: maiden name, other married name street address city state | ation |
| iases: maiden name, other married name reet address ity state | nation | name aliases: maiden name, other married name street address city state primary phone | ation |
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| iases: maiden name, other married name reet address ty state rimary phone rth date reial security number dult #3 Criminal Background Check Inforn | zip code | name aliases: maiden name, other married name street address city state primary phone birth date | ation |
| iases: maiden name, other married name reet address ty state rimary phone rth date recial security number redult #3 Criminal Background Check Inform redult #3 Criminal Background Check Inform | zip code | name aliases: maiden name, other married name street address city state primary phone birth date | ation |
| iases: maiden name, other married name reet address ity state rimary phone | zip code | name aliases: maiden name, other married name street address city state primary phone birth date | zip code |

social security number