

Host Family Application Form

Date: _____

Thank you for your consideration to open your home to an international student!
Please provide the information below. Please be assured that all information will be held in the strict confidence.

*** PLEASE PRINT CLEARLY and send back the first two pages to us.**

Email: info@yesesinternational.com

FAX: 619-450-6963

Address: 7920 Arjons Drive, Suite E, San Diego, CA 92126

1. Applicant Information

Full Name of Host Parent #1			Gender	Full Name of Host Parent #2			Gender
			M / F				M / F
DOB	Country of Birth	Religious Affiliation	DOB	Country of Birth	Religious Affiliation		
Email			Email				
Occupation		Current Employer		Occupation		Current Employer	
Cell Phone				Cell Phone			

2. Residence

Address							
Street							
				City		State	Zip Code
Home Phone				FAX			
Type of Home			# of Bedrooms			# of Bathroom	
<small>Ex. Single home, Condominium, etc.</small>							
Amenity (if any)							<small>Ex. Swimming pool, Outside BBQ etc.</small>

3. Children and Other Persons Living in the Household

Full Name	Gender	DOB	Relationship	Living at Home?
	M / F			Y / N
	M / F			Y / N
	M / F			Y / N
	M / F			Y / N
	M / F			Y / N
	M / F			Y / N
	M / F			Y / N
Pets	Cat # ___ Dog # ___ Other			



4. Household

Will you provide three square meals a day?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever hosted any foreign student?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Would you host a student with a dietary restriction? (ex. Vegetarian)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have any household members been charged with a crime?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please describe:	
What is the main language spoken in home?	
We prefer to host a student for	Short term <input type="checkbox"/> Long term <input type="checkbox"/> Either <input type="checkbox"/>
Our family would like to host a	Boy <input type="checkbox"/> Girl <input type="checkbox"/> Either <input type="checkbox"/>
Our family will host a	Non-smoker <input type="checkbox"/> Smoker <input type="checkbox"/> Prefer a non-smoker but will host a smoker <input type="checkbox"/>
Describe your expectations regarding the responsibility and behavior of the student while in your home (ex. Homework, chores, etc.).	
Briefly describe your neighborhood and community area.	
Briefly describe your family. Ex. We like to go hiking. My son likes Micky Mouse. We go to church every Sunday.	
How did you learn about being a host family?	

I understand that the Y.E.S. office reserves the right to refuse or remove a host family from the Y.E.S. homestay list if they consider that the host family is not suitable for their program. I acknowledge receipt of this Host Family Handbook. I have been provided the opportunity to review its contents and to ask any questions about it of the representative of Y.E.S. ESL International, Inc. If I lose my copy of the Handbook, I may request and will receive another copy
 I acknowledge that I have read and understand the above application and that I sign this form voluntarily.

Print Name _____

Signature _____

Date _____