Youth For Understanding USA

www.yfu-usa.org

US Host Family Application

Please note that the completion of this application does not confirm the placement of a YFU student in your home. It will be used together with an interview to select Host Families. After completing the application, please call your local representative or District Office at 1-866-4 YFU USA for mailing instructions.

Family Information *(please use a ball point pen or type)*

Name: _____
Last *First Name (Father)* *First Name (Mother)*

Title: ❑ Mr. & Mrs. ❑ Mr. ❑ Ms. ❑ Other _____

Marital Status: ❑ Married ❑ Single ❑ Divorced ❑ Widowed

Address: _____
Street *City* *State* *Zip Code* *Area Code* *Telephone*

Father's Occupation/Position: _____ Mother's Occupation/Position: _____

Father's Social Security # _____ Mother's Social Security# _____

Name of Employer: _____ Name of Employer: _____

Address of Employer _____ Address of Employer _____

Work Telephone: (____) _____ Work Telephone: (____) _____

e-mail: _____ e-mail: _____

The best time to call is:_____ a.m./p.m. at home/work.The best time to call is:_____ a.m./p.m. at home/work.

Names(s) of Children (or other* members of household)	Sex	Birth date**	Grade in School**	Living at Home?**
		__/__/____		
		__/__/____		
		__/__/____		
		__/__/____		
		__/__/____		

**indicate relationship of others to applicant* ***indicate for children only*

Interests and Activities: Please specify those that are most important to your family members:

❑ Art: _____ ❑ Community: _____ ❑ Music:_____

❑ Sports: _____ ❑ Other:_____

Do you have pets in your home? ❑ None ❑ Dog ❑ Cat ❑ Other:_____ (specify)

Does anyone in your family smoke? ❑ Yes ❑ No

Would you permit a student to smoke in your home? ❑ Yes ❑ No

Would you permit a student to smoke outside your home: ❑ Yes ❑ No

Has your family hosted before? ❑ Yes ❑ No

If yes, please indicate when and with what organization:_____

Religious affiliation (if any): _____ (specify) How often does your family attend? _____

(Continued on reverse side)

School Information

Local High School Name: _____ (_____) _____
Area Code *Telephone*

Address: _____
Street *City* *State* *Zip Code*

Other Information

How did you hear about YFU? _____

Name of nearest airport to your home (with scheduled commercial service): _____

News release information: By providing this information you authorize YFU USA to notify your local newspaper if your family is selected to participate in the YFU program.

Local newspaper: _____
Name *Address* *City* *State* *Zip*

Please indicate your hosting preferences (if any):

Sex: ❑ Male ❑ Female ❑ Either Countries (please list): _____

Length of stay: ❑ a school year ❑ a semester ❑ 3 months ❑ shorter periods (6 weeks or less)

Optional Information

YFU USA appreciates your filling in the information below. It is for statistical use only and will not be used by YFU USA in making host family selections.

Parent's Age: Father: ❑ 18-24 ❑ 25-34 ❑ 35-49 ❑ 50-64 ❑ Over 64
Mother: ❑ 18-24 ❑ 25-34 ❑ 35-49 ❑ 50-64 ❑ Over 64

Education Levels: Father: ❑ High School or Less ❑ College ❑ Graduate/Professional ❑ Technical
Mother: ❑ High School or Less ❑ College ❑ Graduate/Professional ❑ Technical

Which group describes your family's annual income? ❑ Less Than $20,000 ❑ $20-$30,000 ❑ $30-$40,000
❑ $40-$50,000 ❑ $50-$60,000 ❑ $60-$70,000 ❑ Over $70,000

Community Population: ❑ urban (over 50,000) ❑ suburban (15,000-50,000)
❑ small town (2,500-15,000) ❑ rural (less than 2,500) How long have you lived there? _____

Signature(s) of Applicant(s): _____ Date: _____

_____ Date: _____

Please let us know of others you know who may be interested in receiving information on YFU programs:

_____
Name *Address* *Telephone* *Relation*

_____
Name *Address* *Telephone* *Relation*

_____
Name *Address* *Telephone* *Relation*

May we use your name in contacting these persons? ❑ yes ❑ no