



## **U.S. EXCHANGE PROGRAM HOST FAMILY APPLICATION**

A Program of the Office of Citizen Exchanges, Youth Programs Division  
Bureau of Educational and Cultural Affairs, U.S. Department of State

*Prepared by World Learning*

Locally hosted by:

*World Affairs Council of Kentucky & Southern Indiana*



## U.S. EXCHANGE PROGRAM HOST FAMILY APPLICATION

Applications may be faxed, mailed, delivered, or e-mailed to:

Laura Duncan  
World Affairs Council of Kentucky & Southern Indiana  
Laura.duncan@worldkentucky.org

2500 Montgomery Street, Suite 6  
Louisville, KY 40212  
Phone: (502) 561-5422 ext. 2

For more information on program specifics, contact the office above.

### PARENT 1/GUARDIAN INFORMATION

Parent/Guardian Name		
	Last	First

Date of Birth		Age		Sex	Male	Female
	Month/Day/Year				Circle One	

Place of Birth		Country of Citizenship	
	City and State/Country		

Permanent Address					
	Number	Street	City	State	Zip Code

Permanent Telephone	
---------------------	--

Name of Employer	
Work Address	
Job Title	
Telephone/Email	

Cell phone	
Email address	

### PARENT 2/GUARDIAN INFORMATION

Parent/Guardian Name		
	Last	First

Date of Birth		Age		Sex	Male	Female
	Month/Day/Year				Circle One	

Place of Birth		Country of Citizenship	
	City and State/Country		

Permanent Address					
	Number	Street	City	State	Zip Code



Please describe the physical environment of your home.

--

Have family members lived/traveled/studied abroad? If so, please describe whom, where, and when.

--

Please list any pets you have in your home.

--

Are there any additional comments you have?

--

Please list two personal references un-related to family members.

Name	
------	--

Last First

Permanent Address	
-------------------	--

Number Street City State Zip Code

Permanent Telephone	
Business Telephone	
Relationship to you	

Name	
------	--

Last First

Permanent Address	
-------------------	--

Number Street City State Zip Code

Permanent Telephone	
Business Telephone	
Relationship to you	

### APPLICANT APPROVAL

I agree that all of the information in this application is true and I agree that if chosen to participate, I will abide by the *Homestay Guidelines*. Moreover, I and any household members over the age of 18 agree to undergo a background check as is required by the program.

--	--	--

Printed Name

Signature

Date

--	--	--

Printed Name

Signature

Date