

SUMMIT CHRISTIAN ACADEMY

Host Family Application

HOST FAMILY INFORMATION



List other individuals living in the home:

Name: _____ Age: _____ Relationship _____ Male ___ Female ___ Grade ___
Name: _____ Age: _____ Relationship _____ Male ___ Female ___ Grade ___
Name: _____ Age: _____ Relationship _____ Male ___ Female ___ Grade ___

STUDENT MATCHING INFORMATION

- 1. Gender Request: Boy ___ Girl ___
- 2. Grade Preference: 9 ___ 10 ___ 11 ___ 12 ___
- 3. Will the student have his/her own bedroom? Yes ___ No ___
If no, with whom will the student share a room? Name _____ Age _____ Grade _____
- 4. Does anyone in your household smoke? Yes ___ No ___
- 5. Please list some of your family's hobbies and interests: _____
- 6. Will you be hosting other international students at the same time? Yes ___ No ___
If yes, what ages and gender: _____
- 7. What is your denomination _____ Church Attendance: weekly ___ occasionally ___

FATHER

Name: _____
Address: _____
City: _____
Home Phone: _____
Cell Phone: _____
Employer: _____
Position: _____
Hours: _____ Work Phone: _____
Email: _____

MOTHER

Name: _____
Address: _____
City: _____
Home Phone: _____
Cell Phone: _____
Employer: _____
Position: _____
Hours: _____ Work Phone: _____
Email: _____

- 7. Do you have any family pets? Yes ___ No ___
If yes, what kind(s): _____
If yes, how many are "indoor" pets? _____ How many are "outdoor" pets? _____
- 8. What do you live in? House ___ Condo ___ Apartment ___ Other ___
- 9. How many bedrooms do you have? _____
- 10. Is English your primary language? Yes ___ No ___ If not, what language do you speak at home _____
- 11. Has anyone in your family visited a foreign country before? Yes ___ No ___
If so, who, where, and for how long? _____
- 12. Have you hosted a foreign student before? Yes ___ No ___
If yes, from which country? _____ for how long? _____ through what organization? _____

Each member in the host family over 18 years of age needs to fill out a Washington State Background Check Form.

We appreciate your willingness to open your home to an international student.

Host Father's Signature Date Host Mother's Signature Date

Please mail completed form to: SCA 8913 N. Nettleton Lane | Spokane Washington | 99208

For office use: Date Received: _____ WA background check complete? _____
Name(s) of International students placed with this family: _____
Dates of stay: _____