



HOST FAMILY VISIT REFLECTION

SHORT TERM PROGRAMS

TO BE COMPLETED PRIVATELY BY LOCAL REPRESENTATIVE AFTER EACH VISIT

1. Ethnic Background: Caucasian African American Hispanic Asian Other
2. Primary language spoken in the home? _____
3. Disability? _____
4. The parents' relationship with their children (if applicable) appears to be:
 Very warm and close Good Cool and distant
 Comments _____
5. The parents seem to exercise:
 Firm but friendly control Strict or severe control Poor control
 Comments _____
6. What best describes the neighborhood?
 Big City Suburb Small City Small Town Rural Area
7. How would you describe the home?
 Single Dwelling Townhouse Farm Apartment
 Comments _____
8. How would you describe the interior of the home?
 Clean and organized Cluttered, but clean Visibly dirty and dusty
 Comments _____
9. What best describes the student's sleeping space?
 Separate bedroom Shared Bedroom
 Comments _____
10. What best describes the student's sleeping space?
 Single bed Double bed Hide-a-bed Futon bed Bunk bed Other
11. Will the student's accommodations include:
 Privacy Closet space Dresser Adequate lighting Desk
12. This family would be:
 Excellent Good Fair Inappropriate
 Comments _____

Local Representative Signature: _____ **Date:** _____

Student Name: _____ **Country:** _____

Host Family First/ Last Names: _____ **Program Code:** _____

Please send a copy to Director of Short Term Programs