



CCS International Programs HOMESTAY APPLICATION

International students applying for the Homestay Program should complete the information below. Return this form, with the **nonrefundable** placement fee to:

Spokane Falls Community College	or	Spokane Community College
International Programs MS 3011		International Programs MS 2151
3410 W Fort George Wright Dr		1810 N Greene St
Spokane WA 99224-5288 USA		Spokane WA 99217-5399 USA

The placement fee of \$200 must be received before we can process your request, and at least one month before your arrival. Payment can be made by credit card, check or money order. Checks and money orders should be made payable to COMMUNITY COLLEGES OF SPOKANE. If paying by credit card, provide:

Credit card type: Visa MasterCard Credit card number _____

Expiration date _____ 3 digit PIN number on back of credit card _____

Exact name on credit card _____

Last name _____ First name _____

Indicate which college you are planning to attend: SFCC SCC

For which quarter do you need a homestay?

Summer (June) Fall (September) Winter (January) Spring (March)

Choose one of the plans below:

Full Homestay (\$550 a month) Shared Homestay (\$350 a month) Temporary Homestay (\$350 for two weeks)
(Includes meals) (Does not include meals) (Includes meals)

Your current address _____

City _____ Country _____

Phone _____ E-mail _____

TERMS AND CONDITIONS

1. Participant and his or her heirs, assigns, or other successors in interest agree to release Community Colleges of Spokane representatives, agents and host families from any responsibility and liability of changing who the host family will be prior to or after arrival in the United States; and/or placement in more than one family through the stay.

The participant also agrees:

- To be responsible for carrying valid insurance through the entire homestay period covering at a minimum sickness, accident and personal liability on his/her personal belongings.
- To authorize CCS and the host family to seek medical attention for himself/herself in the event of sickness, accident or other emergencies during the time the student is living with the family. Permission also is granted to release information regarding his/her health to outside physicians and facilities. In all cases, participant agrees that CCS and the host family are not to be held liable or responsible for any aspect of medical treatment received.
- That CCS will not be held responsible and that he/she will reimburse the host family for the repair or other costs incurred by the student in case of damage to the host family's home.
- That CCS will not be held responsible for negligence on the part of the family or the participant pertaining to home or person when damage, injury or death is result.

Student's name (PLEASE PRINT) _____ Date _____

Student's signature _____

STUDENT HOMESTAY STUDENT PROFILE

Father's name and occupation _____

Mother's name and occupation _____

Father's work phone _____ Mother's work phone _____

Brothers and sisters (please include age and gender)

Have you traveled outside your country before? Yes No

If yes, explain:

Have you ever participated in a homestay program? Yes No

If yes, rate your experience: Not good Okay Very good

Do you enjoy animals as family pets? Yes No

Would you enjoy children as part of the family? Yes No

Please explain:

Do you smoke? Yes No

Would you mind if there are smokers in your homestay family? Yes No

What hobbies, sports or other activities do you enjoy?

Are you planning to drive a car? Yes No

How much interaction and conversation with your homestay family do you prefer?

Every day. I want daily conversation.

Several times a week and on weekends.

I'm very independent and prefer to interact only when necessary.

Health Information

Do you have any allergies to food, drugs, animals or medications? Yes No

If yes, explain: _____

Are you a vegetarian, someone who eats no meat? Yes No

If yes, explain: _____

Do you take any medications regularly: Yes No

If yes, explain: _____

How would you describe your present condition of health? Poor Average Excellent

If you would like to provide additional information about yourself or about your expectations, please attach a more detailed letter about yourself that we can share with your homestay family.