

435 South 45th Street Philadelphia, PA 19104 Phone: 215-382-0383

www.rightathomehomestay.com

HOST FAMILY INFORMATION UPDATE AND SUBMIT IN HARD COPY FORM ANNUALLY ON MAY 1

Today's date					
Family name					
Home address					
Home phone					
Primary email address					
Head of Household #	1				
		/er	Position		
Additional contact num					
Head of Household #2	2				
	Employer		Position		
Additional contact num					
All Children					
<u>Name</u>	<u>Gender</u>	<u>DOB</u>	<u>School</u>	Living with you?	
All Others Living in Y	Your Home				
<u>Name</u>	<u>Gender</u>	<u>DOB</u>	Relationship	Occupation	

Do any members of your household have a history of chronthese are managed.	nic physical or mental illness? If yes, explain how
Do any members of your household have a history of subst	tance abuse? If yes, explain.
Do you have pets? What kind? Indoors or out?	
Do you smoke? Would you allow a student to smoke outsice	de your house?
Do you carry adequate homeowners insurance?	
Describe your family lifestyle including hobbies, interests,	memberships, and traditions.
How will your family help international students learn Eng	dish and experience American culture?
How will you encourage students to participate in your fam	nily?
The information above is true to the best of my knowledge	
SIGNATURE:DA	ATE:
SIGNATURE:DA	ATE: