



Host Family Application
International Academic Cultural Exchange, Inc.
23705 Vanowen Street #311
West Hills, CA 91307

Host Family Last Name: _____ Student: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Host Mother Name: _____

Date of Birth: _____ Social Security Number: _____

Host Mother Employer _____ Occupation: _____

Work Address: _____

Work Phone: _____ Cell Phone: _____

Email Address: _____

Host Father Name: _____

Date of Birth: _____ Social Security Number: _____

Host Father Employer: _____ Occupation: _____

Work Address: _____

Work Phone: _____ Cell Phone: _____

Email Address: _____

Please tell us about your family. How would you describe the personality of your family? Do you have any special interest that you pursue together (sports, the arts, biking, etc...)?

Please list all persons including children who live in the household. The U.S. Department of State mandates that all families interested in hosting an international exchange student must submit to a criminal background check. In order to conduct a criminal background, please write social security number(s) and date(s) of birth in the designated areas below for all family members living in the home who are *over the age of 18*.

Name	Sex	Date of Birth	Relationship	Social Security	Hobbies

Are there any special circumstances we should be aware of when placing a student in your home, such as schedules, food restrictions?

What is the primary language spoken in the home? _____

Please list the type of pets you have: _____

Do you have wireless internet in the home (students must be guaranteed internet accessibility from their own laptop)? _____

Does anyone in the home smoke? _____

Has any person staying in your home been convicted of a felony? _____

Have you ever hosted a foreign student before? _____

From what countries? _____

What, if any, were the primary cultural differences? _____

How were these issues addressed? _____

Please list two references, either personal or professional, we may contact.

Name	Telephone	Relationship	Years known/what capacity

Host Family Agreement

The purpose of this agreement is to fully inform host families of their rights and responsibilities as an IACE Host Family.

TERMS AND CONDITIONS: For and in consideration of the opportunity for cultural exchange by the placement of the Visiting Student (s) named above with the host family, the host family named on page one of this Host Family Application hereby agrees to all terms and conditions of the Application.

1. Lodging/Meals – The host family agrees to the following: provide a separate furnished bedroom with wireless access, provide a safe and nurturing environment and treat the Visiting Student(s) as a member of their family, to provide breakfast, lunch and dinner (If the Visiting Student(s) goes out with friends during meal times, the Visiting Student(s) will be responsible for any expenses incurred). El Camino is the only school that provides lunch.
2. **The host family agrees to notify IACE immediately:**
 - If there are any changes in the status of the family and/or if someone over the age of 18 years old will reside at the host family home and will be required to have a criminal background check.
 - If you are considering hosting another exchange student even if on a temporary basis, so that the U.S. Department of State and the Visiting Student’s natural parents can be contacted for the approval of double placement.
 - If the host family will be away from home overnight and to give details 2 weeks prior who will be staying with the student(s) as they are minors.
 - If the Visiting Student(s) travels outside the State of California with host family giving details as to with whom, giving details in case of an emergency PRIOR to the Visiting Student(s) being authorized to travel by IACE.
 - If the Visiting Student(s) natural parents have relatives/friends residing in the Los Angeles area or out of the state, the host family must not allow the Visiting Student(s) to go with the relative/friend unless IACE receives a signed authorization form from the natural parents (which IACE will send to natural parents) and all information on the relative/friend: Name, Address, Phone.
 - Host families must contact IACE in the case of an accident, serious illness, and medical emergency and/or serious problem with the student. Also, if student is taken to doctor so IACE can follow up on medical claim.

3. Medical Care –In the event the Visiting Student(s) requires medical care, the host family agrees that the Visiting Student(s) is provided transportation to medical care. Visiting Student(s) has their own medical insurance. *The host family should have a copy of the Medical Consent Liability Release from IACE when accompanying a minor student.
4. Transportation – On occasions, the Visiting Student(s) may require transportation to various special or social events. When required and possible, the host family agrees to provide such transportation for the Visiting Student(s). Host Families are required to provide local transportation.
5. Supervision- The host family agrees to act as Guardian and assume reasonable responsibility for supervision and safety of the Visiting Student(s) during the placement period. The host family agrees to keep in touch with IACE who will regularly be in contact with the host family, Visiting Student(s) and the school to insure harmony within the student’s home; assist in handling cultural differences; provide “back-up” for the host family as necessary; track grades and school related issue. The host family agrees to respond to emails from IACE in a timely manner.
6. Family Activities/Household Duties – As one of the purposes of the program is to give the Visiting Student(s) experience with American life, we encourage inclusion of the Visiting Student(s) in assisting with normal household chores and in family outings and events.
7. Termination of Homestay – Placement may be terminated with the approval of IACE at the request of the Visiting Student(s), host family or homestay coordinator. If applicable, a refund will be made by the host family payable to IACE. This refund will be the difference of stipend paid, less pro-rated nights due to the family. If the student is sent home or chooses to return to their home country, host will no longer receive a monthly stipend for that student effective immediately since the student is no longer living with host and there is no reimbursable stipend to be given.
8. Attorney Fees – In the event of any dispute between the parties regarding any aspect of this Agreement, the prevailing party in such dispute shall be prevailing party’s reasonable costs in connection therewith including, without limitation, reasonable attorney’s fees, through final disposition of the matter, including final appeal.
9. Post Judgment Fees and Costs – Any party who is awarded attorney’s fees and costs under the terms of this Application shall also be entitled to additional attorney’s fees and costs incurred in enforcement of any judgment. This clause is intended to survive any judgment rendered on the Application and is not to be deemed merged into any such judgment.
10. Entire Application – No Oral Agreements. This Application, which includes exhibits, contains all representations and the entire understanding and agreement between the parties. Correspondence, memoranda, and oral or written agreements that originated before the date of this Application are replaced in total by this Application unless otherwise expressly stated in this Application.
11. Governing Law – This Application shall be governed by and construed in accordance with the laws of the State of California that would apply if all parties were residents of California and this Application was made and performed in California.

12. Severability – If any part of this Application is determined to be illegal or unenforceable, all other parts shall remain in effect.
13. All parties acknowledge that they have been urged to seek legal counsel with respect to the meaning and effect of this application.
14. The monthly stipend given will be pro-rated the month the student arrives and the month the student departs. All other months stipend will be given in full.

My signature below acknowledges the host family agreement requirements as well as gives permission to IACE to conduct a criminal background checks as part of the Host Family Application process.

The host family understands that IACE, its employees and officers, are not responsible for replacement or reimbursement in case if loss or damage to their property while it is being used by the homestay student. The host family is requested not to lend items of value to the homestay student unless they are prepared to assume the risk of possible loss or damage.

We hereby attest that the information provided is complete and correct to the best of our knowledge. We have read the Terms and Conditions of Visiting Student Placement above and agree to all of them. We hereby agree to defend, indemnify, and hold harmless the employees, officers and directors of IACE for any damages for claims, judgments, awards, and expenses arising out of any willful or illegal misconduct or negligent acts or omissions committed by us and/or any member of our family and arising out the performance of this application.

Signature of host family parent

Date

Signature of host family parent

Date

Signature of Sandra Hays - President/CEO - IACE

Date

Background check date:

International Academic Cultural Exchange, Inc.

Cell: 818-632-8549

Website: www.iacela.com

Email: sandra@iacela.com

“Every Culture Has Something To Teach The World”

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