

HOST FAMILY APPLICATION

Name of Host Family	
Home Congregation	Pastor(s)
Applying for School Year	
Preference of International Student: Male	Female
Preference of International Student: Grade 9 _	10 11 12
Fall semester Spring semester	
Referred by: (agency or individual)	
Manitowoc Luthe	ran High School
4045 Lance	er Circle
Manitowoc, Wiscor	4000 1104
Telephone: 920-682-021	5 Fax: 920-682-2363
Telephone: 920-682-021 Website: <u>www.ml</u>	5 Fax: 920-682-2363 Ihslancers.org
Telephone: 920-682-021	5 Fax: 920-682-2363 Ihslancers.org mlhslancers.org
Telephone: 920-682-021: Website: <u>www.ml</u> Email: <u>rruediger@r</u>	5 Fax: 920-682-2363 Ihslancers.org mlhslancers.org the above email address. ust be completed thoroughly
Telephone: 920-682-021: Website: www.ml Email: rruediger@n Questions may be directed to For consideration, applications m	5 Fax: 920-682-2363 Ihslancers.org mlhslancers.org the above email address. ust be completed thoroughly

Host Family Information – print clearly in black ink

Husband's first name	Wife's first name	Family's last name	Family's last name				
Home address	ne address City						
Home telephone number	telephone number Home email address						
Home congregation	Pastor(s)	Widower ₋	Widow				
Marital Status of Parents: M	arried Divorced Re	emarried					
Father/Mother Informa	ation – print clearly in black ink						
Father's name	Occupation	Name of company	/				
Home address (if different from above)	City	State	Zip Code/Postal Code				
Business address	City	State	Zip Code/Postal Code				
Business telephone	Mobile phone						
Email address	Fax number						
Mother's name	Occupation	Name of company	,				
Home address (if different from above)	City	State	Zip Code/Postal Code				
Business address	City	State	Zip Code/Postal Code				
Business telephone	Home telephone	Mobile phone					
Email address	Fax number						

Home Information

What are your children's responsib	ilities at home?	?				
Do you have a curfew at home?	Yes No	If yes, v	vhat tim	e weeknigh	ts?	weekends?
Do you have pets?(Please stat what kind a						
(Please stat what kind a	and how many?)					
Do you have internet connection a	t home? Y	es No				
Do you have homeowner's insuran	ce? Yo	es No				
Would your international student h	nave their own	room?	Yes	No		
If sharing a room, with whom?						
Please describe your home life and	schedule					
Emergency Information						
In case of an emergency and we a	re unable to re	ach the h	ost pare	nt(s), pleas	e provide t	he information for an
emergency contact below:						
Name		R	elationsl	nip		
Telephone		M	obile ph	one		
Email Address						
In applying to be a host family at Manitow procedures, and regulations as outlined in biography may be shared with internation information, such as addresses, telephone	the student hand al exchange agen	lbook and c	ther publ r to matcl	ications. I und n host families	derstand that and student	the host family's s. All personal
Parent Signature		ent Signature				 Date

HOST FAMILY'S BIOGRAPHY

(please complete so we can get to know your family)

Family Information—print clearly in black ink

Host family's name	2				
Children: (if applicable)	Boy		Age	Girl	Age
	Воу		Age	Girl	Age
	Воу		Age	Girl	Age
What school	do your childr	en attend?	·	What	grades?
Personal Info SPORTS (check all that your badmint baseball basketba bicycling bowling camping	family likes to do) con all g	cheerleading dance fishing football gymnastic ice hockey		horse riding hunting ice skating martial arts rollerblading snow skiing	soccer swimming tennis track volleyball water skiing
(check all that your ballet board ga classical drama/t Other, please	ames music heater e specify	drawing/paint listening to mu museums reading	_	theater singing symphony playing a musical i	nstrument
compute cooking Other, please	ers	handicrafts sewing/knittin		gardening traveling	

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YOUR PARISH PASTOR RECOMMEN	DATION
are/is applying to host an inter High School. The MLHS administration would like your evaluation of	
comments are welcome and valued.	
◆Spiritual life	Comments
♦Worship and communion attendance	
♦Family life	
◆Dependability/faithfulness	
◆Communication skills	
How long have you known this family or individual?	
List any factors in the home environment that influence this applican	t favorably or unfavorably.
To your knowledge, are there any factors that might affect this appointment?	olicant in being a host to an international
Other comments:	
Recommendation:	
☐ I recommend this applicant without reservations.	
I recommend this applicant, but with reservations.I do not recommend this applicant.	
☐ Contact me. I would like to discuss this applicant with you.	
Signature of pastor	_ Date
Email address	Telenhone

Pastor: Please email or mail this completed recommendation to:

Manitowoc Lutheran High School Renée Ruediger, International Program Director 4045 Lancer Circle, Manitowoc, WI 54220 USA

rruediger@mlhslancers.org

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F	PER	SOI	NAI	ĿŔ	COMMENDATION					
	trati				ng to host an international student at Manice your evaluation of this family or individ					
Diagram and the couling the fellow										
Please rate the applicant in the follo	win 1				Communication skills		_	2		_
Family life Dependability/faithfulness		2 3		5 5	Work ethic	1		3		
			4		Ability to work with youth	1		3		
Reputation among acquaintances Responsibility	1 2		4		Reactions to criticism	1		3		
Christian concern for others	1 2					1		3		-
1=Unacceptable		2=B			Ability to meet commitments age 3=Average 4=Good 5=Superior				4	
To your knowledge, are there any student?					ght affect this applicant in being a host to	an int	:err	nati	iona	al
Recommendation: □ I recommend this applie □ I recommend this applie	cant cant	with	nout	t re	vations.					_
☐ I do not recommend thi Signature Email address										

Please email or mail this completed recommendation to:

Manitowoc Lutheran High School Renée Ruediger, International Program Director 4045 Lancer Circle, Manitowoc, WI 54220 USA

rruediger@mlhslancers.org

Host Family Criminal Background Check Consent Form

Each member of the host family's household who is 18 years of age and older must complete and sign this form. Please print.

1. Given Name:	
Family Name:	
Middle Name:	
Former Names (if any):	
Birthdate:	
Signature:	
2. Given Name:	
Family Name:	
Middle Name:	
Former Names (if any):	
Birthdate:	
Signature:	
3. Given Name:	
Family Name:	
Middle Name:	
Former Names (if any)	
Birthdate:	
Signature:	
4. Given Name:	
Family Name:	
Middle Name:	
Former Names (if any)	
Birthdate:	
Signature:	