



**Kansas 4-H International Exchange Programs
 IFYE Host Family Application Only
 Save this completed form as a .pdf and e-mail to:
 Chelsy Champlin, chelsycoen@gmail.com**

Family Last Name:
Street Address:
Mailing Address (if different):
Town: State: Zip:
County:
Home Phone, or N/A, if none:

Adult #1 (Primary Contact):	Mobile Phone:
E-Mail:	Work Phone:
Employer:	Occupation:
Personal Interests:	

Adult #2:	Mobile Phone:
E-Mail:	Work Phone:
Employer:	Occupation:
Personal Interests:	

Emergency Contact:	Phone:
Relationship to Family:	

List other adult family members over 18-years-old and regular overnight adult guests in the home:

Name	Gender	Hobbies/Personal Interests
1.		
2.		

List youth family members under 18-years-old living in the home:

*Age as of time of hosting. **Date of Birth, use mm/dd/yyyy, e.g., 12/08/2005

Youth Name	Gender	Age*	DOB**	Hobbies/Personal Interests
1.				
Favorite Sports:				
Favorite Music:				

Youth Name	Gender	Age*	DOB**	Hobbies/Personal Interests
2.				
Favorite Sports:				
Favorite Music:				

Youth Name	Gender	Age*	DOB**	Hobbies/Personal Interests
3.				
Favorite Sports:				
Favorite Music:				

Youth Name	Gender	Age*	DOB**	Hobbies/Personal Interests
4.				
Favorite Sports:				
Favorite Music:				

Youth Name	Gender	Age*	DOB**	Hobbies/Personal Interests
5.				
Favorite Sports:				
Favorite Music:				

Why does your family want to host?

Family activities during the summer:
What language(s) is/are spoken in your home?
List any amenities that an exchangee could use in your home:
List any home-based business:

List any and number of indoor pets:
List farm and/or outdoor animals:
For farms, list number of acres and type(s) of crops:
What is your family's religious affiliation, if any?
How often do you attend religious services?

Are there any physical, developmental or psychological health conditions in your family of which an exchange delegate would need to be aware, e.g., physical disability, Down Syndrome, hearing loss, ADD/ADHD, etc.:

Type of Community:	City:	Town:	Rural, Non-Farm:	Farm:
Type of Home:	Apartment:	Single Family:	Townhouse/Condo:	Mobile:
Smoking Status:	Smoking Forbidden:	Smoking Permitted Outside:	Smoking Allowed in Home:	
Preference for Exchangee:	Male:	Female:	Either Okay:	
Age Preference, if any:				

Additional Information:
Is anyone in your family currently a 4-H member or been involved with 4-H?
Are any adults in your family currently working for or volunteering with 4-H?
Have any adults or teens in your family completed the KS 4-H Volunteer Screening the past 2 years?
If yes, which adults or teens:
How did you learn about hosting with this program?
Has your family hosted an exchangee before?
List any previous exchangees' countries:
Describe any family dietary restrictions:

Would you be able to host an exchangee who follows a dietary restriction? Vegetarian, no pork, etc.:

Is your family financially able to provide the exchangee a bed, three meals a day, and any family activities you may choose to do for the duration of the exchange program?

Included any additional information about your family that would be helpful to the exchangee:

Two References Needed:

Name 1:	Name 2:
Address:	Address:
Town: State: Zip:	Town: State: Zip:
Phone:	Phone:
E-Mail:	E-Mail:

Please provide this link to your two references to complete and return in a timely basis on your behalf: http://www.kansas4-h.org/events-activities/global-citizenship/host-family-information/docs/Host_Family_Confidential_Reference.pdf

Criminal Background Checks of Adult Host Family Members:

Kansas 4-H Youth Development endeavors to conduct a criminal background check on adults 18-years-old or older living in the household who will be hosting an exchangee in Kansas 4-H International Exchange Programs. If you have finished the 4-H volunteer screening process in your county/district during the past three years, you do not have to complete another criminal background check.

Adults who have completed the local 4-H volunteer screening process	Year Completed
1.	
2.	
3.	

If you need to complete the criminal background check, there are tips on the Kanas 4-H web site to assist with this process. Visit: <http://www.kansas4-h.org/events-activities/global-citizenship/host-family-information/index.html/>. Go to the bottom of the page where you will find: “Tips on Submitting the Electronic Form for the National Background Check.” This process is electronic and is done all on-line.

Please note that you must identify this form as IFYE. Specifically when prompted, under the field – Address 2, type in “IFYE Host Family Check”. This will allow us to track your family’s background checks in the system much easier. If you have questions or need help, please contact Keli at 785-532-5800, M-F, 8 a.m. – 4:30 p.m. or e-mail her at keliy@ksu.edu.

Please paste one to three photos with captions to share with your exchangee:

I authorize K-State Research and Extension or their assignees to record and photograph my image and/or voice (or that of my child, if under 18) for use in research, educational and promotional programs. I also recognize that these audio, video and image recordings are the property of K-State Research and Extension.

No, I do not authorize use of my – or my child’s – individual image or voice.

Evaluation Release

- I hereby establish my willingness to participate as an adult (i.e. 4-H leader, other volunteer, parent/guardian, site manager, etc.) and give permission for my child (under 18 years of age) to complete evaluations that will be used to determine program effectiveness or to promote the program.
- I understand that participation in program evaluations is voluntary and that I and my child may choose not to participate and may withdraw from evaluations without impact on my or my child’s eligibility to participate in the 4-H program.
- I understand that I or my child may be asked for consent before completing an evaluation.

No, I am not willing to participate – or give permission for my child to participate – in any program evaluation

I have read and understand and the Publicity Release and Evaluation Release, and agree unless otherwise marked.

General Release

I hereby release local Extension Councils and Districts, Kansas State University, the State of Kansas, and their agents, officers and employees, from all claims, demands, and causes of action of any kind (up to and including death), including claims of negligence, that may arise from participation of me or my minor child in any Kansas 4-H sponsored activity, and this release is specifically granted in consideration of the services, programs and activities.

Parent/Guardian or Primary Adult Participant Signature
(Legal signature may be typed).



Date _____

When your application and references are completed, you will be contacted about an in-home interview before the exchange placement is complete.

Please save a copy of this form-fillable file as a .pdf, and e-mail to:

Chelsy Champlin
KS 4-H International Exchange Programs Inbound Coordinator
chelsycoen@gmail.com
785-248-6131