



Host Questionnaire

Congress-Bundestag Youth Exchange

Thank you for your interest in the CBYX program! Please answer the questions below and submit it to Cultural Vistas by email. Cultural Vistas will use this information to see if we can match you with a participant who will fit into your home life. Please include photos of your home, especially of the room where the participant will stay (preferably via email). We also encourage you to include any additional materials/information for us to forward on to the participant whom you will host.

Full Name

Address

City, State, Zip Code

Home Phone

Cell Phone

Work Phone

Email

Participant's Name

College

Please tell us about each family member.

ADULTS

Full Name	Gender	Age	Occupation

CHILDREN

Full Name	Gender	Age	Occupation

Please note if you have a gender preference:		Yes	No	If yes, what is your preference?		Female	Male
How strong is your preference?		Very strong. We can only host the preferred gender.			Moderate. We can still host the non-preferred gender.		



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Please describe the area where you live. (urban, suburban, rural, etc.)	
Is there public transportation in your area? If so, would it be possible for participants to take public transportation to the college? <i>Note: Typically, all participants are required to purchase a car.</i>	
Please describe the living arrangements for the participant. <i>Note: It is a requirement of the program that the participant has his/her own room. Please submit a photo of the participant's bedroom with this form.</i>	
Do you have any pets? Please list types and feel free to include names, ages, and breed.	
Please list any hobbies, sports, or activities that family members enjoy.	

Do you regularly eat meals together?	Yes	No	Sometimes
Do any of your family members smoke?	Yes	No	Sometimes
Will the participant be allowed to smoke?	Yes	No	Outdoors Only

RELIGION (Optional)

Do you attend services regularly?	Yes	No	Sometimes
Will the participant be expected to attend?	Yes	No	Sometimes

(Please note that although we encourage participants to attend services with you to experience them, they are not obligated to attend regularly.)

Have you hosted international students before?	Yes, with CBYX	Yes, with other program	No
Why would you like to host?			
Are you willing to host a student for a full year? If not, for how long?			
How did you hear about CBYX?			

Signature

Date

Please return this form to ccox@culturalvistas.org.