

# Pella Christian High School International Student Program Host Family Application

Pella Christian High School's vision for our international students is that they will **observe** Christian values in the host home and school; **develop** their intellectual gifts through academic excellence; **build relationships** with our students, promoting global and cultural awareness and understanding; and **be prepared** to return to their passport countries as servant leaders.

This application does not automatically mean that an international student will be placed in your home, nor does it commit you to accept a student until you have been contacted with further information.

## *Family Information*

Address: \_\_\_\_\_  
Street City State Zip

Father's Name: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employed by: \_\_\_\_\_

Position: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Home Number: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employed by: \_\_\_\_\_

Position: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Children	Birth date/Age	Gender	Grade	School Attending
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Pets \_\_\_\_\_  
inside/outside the home \_\_\_\_\_

Transportation to and from School

\_\_\_\_\_ Personal Vehicle    \_\_\_\_\_ School Bus    \_\_\_\_\_ Walking/Biking    \_\_\_\_\_ Carpool  
\_\_\_\_\_ Other - Please Explain \_\_\_\_\_

Church Membership: \_\_\_\_\_  
Name \_\_\_\_\_ City \_\_\_\_\_

Weekly Involvement: \_\_\_\_\_  
\_\_\_\_\_

Other Weekly Activities: \_\_\_\_\_  
\_\_\_\_\_

International Student Preferences

We would prefer a \_\_\_\_\_ Male Student    \_\_\_\_\_ Female Student    \_\_\_\_\_ No Preference  
Grade Preference    \_\_\_\_\_ 9    \_\_\_\_\_ 10    \_\_\_\_\_ 11    \_\_\_\_\_ 12

Previous Experience with Internationals and/or hosting other children in your home:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Motivation for Hosting an International Student: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Family Hobbies/Interests: \_\_\_\_\_

Please read the following statements and choose/mark a location on the scale provided that best represents your family. Make any additional comments that will help explain your answer. Please note: *There is no right or wrong answer.* This information is used to help us make the best possible student/family placement and prepare for on-going support throughout the year.

1. Our home could be characterized as:

Very Casual ←————→ Very Structured  
Active/Noisy ←————→ Quiet/Studios  
Rarely Home ←————→ Homebodies

2. Our family tends to travel out of the area over holidays and school vacations:

Frequently ←————→ Rarely

3. One or more parents tend to travel overnight:

Weekly ←————→ Never

4. Each week our family eats dinner together:

7 Nights ←————→ 1 Night

5. When it comes to cleanliness, our family is:

Neat & Orderly ←————→ Not a Priority

6. The importance of children participating in household chores is:

Written expectations ←————→ Appreciated

Daily chores ←————→ Weekly chores

7. The laundry in our home is primarily done by:

Parents ←————→ "To each his own"

8. We anticipate privacy in our home to be:

Need guidelines ←————→ Not an issue

9. Computer and internet use in our home is:

Highly Regulated ←————→ Trusted on own

10. Daily television use in our home is:

No television ←————→ Usually on when home

11. Our family attends church:

Every week ←————→ Once a month

12. Our weekly commitment to church related activities is:

4 times/week ←————→ 0 times/week

Comments about any questions above that need further explanation:

13. How comfortable are you sharing your personal relationship with Jesus with a teen?  
 Excited ←————→ Not very confident
14. Describe your child/ren’s attitude towards having an international student in your home:  
 Enthusiastic ←————→ Willing to try
15. How would you describe your normal communication methods with your own child/ren?  
 Open/honest ←————→ Tendency to avoid
16. How comfortable are you with allowing teenagers to “challenge” adults?  
 Never appropriate ←————→ Comfortable, if constructive
17. When it comes to your child’s standard of dress, how involved are you?  
 Set guidelines ←————→ Child’s responsibility
18. When your child is out at night, how much supervision do you provide?  
 Check ahead ←————→ Trust child to check in
19. As far as academic expectations, our family has:  
 Specific grades ←————→ “Try your best”
20. Giving rides to and from school and activities will be:  
 Not a problem ←————→ Challenging

Comments:

1. What kind of assistance are you prepared to give your student with their academics?
2. What is your discipline philosophy?
3. Do you foresee any challenges-vacations, transportation, etc.?
4. Have your children ever used tobacco, drugs, or alcohol? If yes, explain.
5. Is there anything in your life that would need explanation or be a cause of concern if International students or their parents were to learn of it or observe it? (This will be kept confidential and be discussed at our home meeting.)

***Background Check Authorization, Release & Acknowledgement***

The safety and security of students is extremely important to Pella Christian High School (hereafter *school*). Therefore, it is the school's policy to run background checks on all host families, volunteers, and employees who will be involved in the international student program. This practice is endorsed by the U.S. Department of State, the Association of Christian Schools International (ASCI), and the Council on Standards of International Educational Travel (CSIET).

Please provide the following information for each individual residing in your household who is 18 years or older. Please Print. Please use person's **full legal name**. Copy and use additional pages, if needed.

Name \_\_\_\_\_  
*First* *Middle* *Last*

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

DL# \_\_\_\_\_ State Issued \_\_\_\_\_

Name \_\_\_\_\_  
*First* *Middle* *Last*

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

DL# \_\_\_\_\_ State Issued \_\_\_\_\_

Name \_\_\_\_\_  
*First* *Middle* *Last*

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

DL# \_\_\_\_\_ State Issued \_\_\_\_\_

Name \_\_\_\_\_  
*First* *Middle* *Last*

SS# \_\_\_\_\_ Date of Birth \_\_\_\_\_

DL# \_\_\_\_\_ State Issued \_\_\_\_\_

***Signature(s) below authorizes PCHS to complete a background check for names listed above of (over 18 years of age): Need signature for each name.***

\_\_\_\_\_  
\_\_\_\_\_

***Pastoral Reference***

To be completed by someone in spiritual authority over the family.

The above named family has offered to host an international student in their home for a school year. Please help us find the best placement for our students by responding to the questions below with complete honesty. Your frankness is greatly appreciated, and we will treat your reply confidentially. Please return this form directly to the International Student Program Coordinator at the address given, or email the completed form to the email provided. Thank you!

How long, how intimately, and under what circumstances have you known this family?

Please describe this family's Christian faith.

Do you think that this family will nurture the spiritual growth of a student placed in their home? Please explain your answer.

Please comment on why you think this family should or should not serve as a host home family.

*Pastoral Reference Continued*      *Host Family's Name:* \_\_\_\_\_

Are there any ongoing circumstances in the family that the school should know about before placing a student in the family's home? If yes, please explain.

Continued on next page ◇

Do you have any additional comments about this family?

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Phone (preferred #) \_\_\_\_\_ Email: \_\_\_\_\_

Please return this form in a sealed envelope to the **International Student Program Coordinator** listed below, or send it electronically:

ISP Coordinator: Cindy Nikkel

School: Pella Christian High School

Address: 300 Eagle Lane  
Pella, IA 50219

Email: nikkelc@pceagles.org

***Personal Reference***

To be completed by a friend of the family who does not work for the school.

The above named family has offered to host an international student in their home for a school year. Please help us find the best placement for our students by responding to the questions below with complete honesty. Your frankness is greatly appreciated, and we will treat your reply confidentially. Please return this form directly to the International Student Program Coordinator at the address given, or email the completed form to the email provided. Thank you!

How long, how intimately, and under what circumstances have you known this family?

Would you feel comfortable placing your own child in this family's home? Please explain.

What are this family's strengths and weaknesses?

Please comment on why you think this family should or should not serve as a host home family.

*Personal Reference Continued*      *Host Family's Name:* \_\_\_\_\_

Are there any ongoing circumstances in the family that the school should know about before placing a student in the family's home? If yes, please explain.

Continued on next page ◇

Do you have any additional comments about this family?

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

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Street City State Zip

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Pella, IA 50219

Email: [nikkelc@pceagles.org](mailto:nikkelc@pceagles.org)