



Host Application

Today's Date: _____

Desired Placement Date(s): _____

Please print or type, complete all spaces, and use the most current version at www.ihausa.com.

PRIMARY HOST INFORMATION

Male Female

Date of Birth _____

Name _____
First name (legal) Middle initial (legal) Last name (legal)

List any other names ever used (*nicknames, aliases, maiden, prior married, etc.*) _____

Home Address _____ # Bedrooms _____ # Baths _____

City State Zip

Own Rent Lease
Years. ____ Months. ____ Lease Expires ____

House Halfplex Townhome Condominium Apartment Coop

Community/Neighborhood (*River Park, E. Sacramento, Rosemont, College Greens, North Berkeley, Sunset, etc.*) _____

Previous cities that you have lived in within the last 5 years (*list state if not CA*) _____

Have you ever been charged and/or convicted of a felony offense within the last 7 years Yes No

Home Phone _____ Mobile/Cell Phone _____

Business/Office Phone _____ Fax _____

email Address (1) _____

email Address (2) _____

email Address (3) _____

Title/Occupation(s) _____

Company/Organization(s) _____
(even if you are self-employed)

Typical Work Schedule (*indicate hours*)

Sun _____ Mon _____
Tue _____ Wed _____
Thur _____ Fri _____
Sat _____ Comments _____
Comments _____

"Providing Memorable Homestay Experiences"

Phone - 916-684-8909 | Fax - 916-314-8500 | email - homestay@ihausa.com
Web - www.ihausa.com | P.O. Box 1045 | Sacramento, CA 95812



FIRST INITIAL & LAST NAME: _____

HOST INFORMATION - continued

SECONDARY HOST INFORMATION

Male Female

Date of Birth _____

Name _____
First name (legal) Middle initial (legal) Last name (legal)

List any other names ever used (*nicknames, aliases, maiden, prior married, etc.*) _____

Relationship to Primary Host (*spouse, fiancé(é), etc.*) _____

Cell/Mobile Phone _____

Business/Office Phone _____ Fax _____

email Address(es) _____

Title/Occupation(s) _____

Company/Organization(s) _____

Typical Work Schedule

Sun _____ Wed _____

Mon _____ Thu _____

Tue _____ Fri _____

Comments _____

OTHERS IN YOUR HOME

Please list others that live or will live in your home (*Includes children, family, roommates, guests, etc.*)

	First	MI	Last	Age	Relationship	M or F
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____

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GUEST GENDER PREFERENCE

No Preference Male Female

ACCOMMODATIONS

Room Type: I am willing to provide... (check all that apply)

Private Room(s) The number and size of each room, that will comfortably accommodate one (1) guest.

Room #1 Room #2 Room #3 Room #4

Private Room Measurements

_____	_____	_____	_____
-------	-------	-------	-------

(Please do not include interior closet space nor nooks in your measurements)

example 10' x 11'

Comments _____

Shared Room(s): The number and size of each room that will comfortably accommodate two (2) guests.

Shared Room #1 Shared Room #2 Shared Room #3 Shared Room #4

Shared Room Measurements

_____	_____	_____	_____
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(Please do not include interior closet space nor nooks in your measurements)

example 12' x 14'

Comments _____

Bathroom: Guest will have Private Bathroom Shared Bathroom (to be shared with:)

_____ Name (s)

Study Area/Lighting: Guest will have (check all that apply) A well-lit desk/table in the room A well-lit, quiet desk/table in the house

Internet Access: Configuration (check all that apply):

Wireless Router Modem Broadband (Cable) DSL (Dial-up) Standard (Dial-up)

Comments _____

Pets: (check all that apply, fill in size, number, and whether indoor or outdoor pet) – I have no pets

Dog(s) _____ Cat(s) _____

Size Number Indoor or Outdoor Size Number Indoor or Outdoor

Bird(s) _____ Other(s) _____

Size Number Indoor or Outdoor Size Number Indoor or Outdoor

Laundry: In Garage In House Other _____

Backyard: (please describe) _____

Smoking: Are you a smoker? Yes No

Where can guests smoke? Outside (ie. driveway/sidewalk) Inside Not permitted anywhere

Country Preference: No preference I won't host guests from _____

I prefer guests from _____

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MEALS

Meals – One of the most important requirements of a homestay host is providing three required meals to your guest(s). What typical daily meals will you provide your guest(s)?

Breakfast _____

Lunch _____

Dinner _____

Will the guest be expected to eat meals at the same time as you or your family? Yes No

Are you any form of vegetarian or vegan? Yes No

Do you or any family members have any dietary restrictions? Yes No If yes, please indicate

Are you willing to host a guest with the following dietary restrictions: medical, religious, vegetarian? Yes No

PROXIMITY TO UNIVERSITY/COLLEGE

Which universities, colleges, language schools, or major employers are close to you?

School _____ Miles _____ Public Transit / Walking Driving

School _____ Miles _____ Public Transit / Walking Driving

School _____ Miles _____ Public Transit / Walking Driving

TRANSPORTATION

(To and from School/Business)

How will you assist your guest? *(check all that apply):*

Public Transit *(IMPORTANT even if you don't use public transit)*

Please research transit route options and commute time and please share with the IHA Homestay Coordinator before or during your interview. Please be specific - Use transit website and call IHA for the correct school address. A typical daily schedule is arrival (at school) between 8:00 am - 9:00 am and evening arrival (back at home) between 3:30 pm - 5:00 pm. Also research the latest time a guest can take public transit from school (indicated in recruitment and could be out and still use transit to arrive at your home.

I have researched the public transit options below

Option #1 Walk to _____ Bus # _____ and/or
Train to _____ Walk to _____

Option #2 Walk to _____ Bus # _____ and/or
Train to _____ Walk to _____

Option #3 Walk to _____ Bus # _____ and/or
Train to _____ Walk to _____

Option #4 Walk to _____ Bus # _____ and/or
Train to _____ Walk to _____

Daily (Mon-Fri)

Occasionally (when?) _____

Average total commute minutes (including walk) _____

Bicycle *(with mandatory helmet provided by host and safe route provided)*

Private Vehicle Drop off & Pick-up

Daily (Mon-Fri) Occasionally (when?) _____

by Primary Host Secondary Host Neighbor Other _____

Other form of Transportation _____

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FIRST INITIAL & LAST NAME: _____

LANGUAGE & RELIGION

Is English the primary language(s) spoken in your home? Yes No If no, what is?

Which other languages do you speak? _____

Does the guest's ability to speak fluent conversational English matter? No Yes if Yes, why?

Are you willing to devote time to help your guest improve his or conversational English skills Yes No

Your religion? _____ Will guest be expected to attend services with you? No Yes

Are you willing to host a guest of a religion different from yours? No Yes

PREVIOUS HOST/GUEST BACKGROUND, TRAVEL, AND INTERESTS

Homestay Guest – (check all that apply):

- Never been a homestay guest
- Primary Host has been a homestay guest
- Secondary Host has been a homestay guest
- Other(s) (please name) _____

Prior Host Experience - Have you ever hosted a guest before? Yes No If yes, when and for which homestay company or organization? _____

Motivation to Host - Why do you want to become a host for International Homestay America (IHA) and why do you think you would be an outstanding homestay host? _____

Travel - have you traveled outside the U.S.? No Yes If Yes, where? _____

Hobbies and Activities – Please describe what you and/or members of your household enjoy. (This information will be used in whole or part for a profile of you and then sent to your international guest.) _____

Insight and Experiences - What insights and experiences do you think you will share with your guest? _____

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FIRST INITIAL & LAST NAME: _____

DISCUSSION QUESTIONS/ISSUES FOR PROSPECTIVE GUEST(S)

IHA requires that hosts write and present house rules and/or expectations to international guest. Please note any **expectations, rules, or guidelines** that are the most important to you in your home.

ADDITIONAL INFORMATION

Please note any additional information that you would like for IHA to know about you, your family, or living arrangement that may aid IHA staff in arranging an optimal placement.

HOMESTAY CERTIFICATION STATEMENT & CONSENT FOR BACKGROUND CHECK

I certify that all of the information provided on this application is true and correct. I understand and agree that, as part of the application process, a background check, reference check, and interview will be conducted.

*x _____ *x _____
Primary Host Signature Date Secondary Host Signature Date

Printed Name Printed Name

***A signature is required on this IHA Host Application to be processed.
You may sign then fax this page to IHA separately or sign, scan, then email homestay@ihausa.com separately.**

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TRACKING & REFERRALS

How did you, originally, find out about International Homestay America (IHA)?

Search Engine Name (ex. Google, Yahoo, etc.) _____

Search terms (please write in) _____

Friend Classmate IHA Host Co-Worker Relative Business Associate Other

Name *email or Phone*

IHA Website Other Website (please write in) _____

University, College, School (please write in) _____

Advertisement (TV, Radio, Magazine, Internet, etc.) _____

Referrals - We love ♥ Referrals



Who do you know that may also be interested in becoming a homestay host?

(Neighbor, family, friend, coworker, classmate, union, church, club, sorority/fraternity, team, facebook friend, LinkedIn connection)

Name *Relationship* *email*

Comments _____

Prior to receiving placements, you are required complete, and we will provide you with, an 'IHA Host Agreement and Terms & Conditions' document and a federal 'W-9 form.

FOR IHA OFFICE USE ONLY

Host Approved Yes No

Background checks completed by: _____ Date: _____

Background check comments: _____

Home visit conducted by: _____ Date: _____

Comments from home visit: _____

Proposed placement: _____ Contact Date: _____

Initial meeting date: _____ Placement accepted? Yes No

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