

# Host Family Application 2012-2013

Texas Academy of Mathematics and Science ♦ University of North Texas

To be completed by the Host Family. This information will be released to the students in need & their families.

Host Family: Mr. \_\_\_\_\_ Mrs. \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Hm Phone: \_\_\_\_\_ His Wk Phone: \_\_\_\_\_ Her Wk Phone: \_\_\_\_\_

We would like a: ☐ Male Student ☐ Female Student ☐ No Preference # of Students to host \_\_\_\_\_

Answers to the following questions will be shared with students in need of a Host Family and their families so they may select a host family. Your answers will in no way be used by TAMS to discriminate on the basis of sex, religious preference, and/or national origin.

**Answer only those questions you feel comfortable answering.**

## 1. RELIGIOUS AFFILIATION

My religious affiliation is \_\_\_\_\_.

I attend church ☐ regularly ☐ sometimes I do not attend ☐.

It is important that the student attend a similar church as mine. ☐ yes ☐ not necessarily ☐ no

## 2. FAMILY BACKGROUND

Check appropriately: ☐ White ☐ Hispanic ☐ Black ☐ Asian \_\_\_\_\_ Other \_\_\_\_\_

How many children do you have? \_\_\_\_\_ Please list their names and ages:

Name	Age
_____	_____
_____	_____
_____	_____
_____	_____

## 3. INTERESTS & ACTIVITIES

☐ Art ☐ Biking ☐ Bowling ☐ Camping ☐ Computers ☐ Dance ☐ Games

☐ Hiking ☐ Movies ☐ Science ☐ Shopping ☐ Sports ☐ Tennis ☐ Theater

☐ Music What kind? \_\_\_\_\_

Other: Please specify \_\_\_\_\_

## 4. OVERNIGHT STAY: In the event of an overnight stay by the student, I/we have:

☐ A guest bedroom ☐ A private bathroom

☐ A shared bedroom ☐ A family bathroom

☐ A sofa/sleeper

## 5. ADDITIONAL INFORMATION: Please provide additional information about your family: college/degrees, occupation, clubs/hobbies, describe home (city, country, acreage), children's activities/interest, etc.

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**EMPLOYMENT EXPERIENCE**

- ◆ Applicant's Employer \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_  
Address \_\_\_\_\_ Job title \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_
- ◆ Co-Applicant's Employer \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_  
Address \_\_\_\_\_ Job title \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_

**REFERENCES**

Please list two persons not related to you who can comment on your character. If you have previous experience as a youth volunteer, one reference should be from an organization.

Name	Address	Telephone	Relationship
_____	_____	_____	_____
_____	_____	_____	_____

I/we certify that all information provided on this application is true and complete. I/we give TAMS permission to contact the above references and to obtain a criminal record report. I/we understand that falsification or significant omissions of any information may be considered justification for disqualification.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

For office use:  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_