



Catterson, Mark and Mary	IN	
Family Last Name, First Name	State	Participant Name (if known)

Form A: Host Family Introduction
To be completed by host family. Please type or print in black ink.
This form will be shared with the participant and his/her natural family.

One World Area Team/Chapter Catterson	Kokomo High School High School Name Mark	M.	History Professor	IN State IU - Kokomo
Host Parent #1 Last Name Catterson	First Name Mary	Middle Initial M.	Occupation Free-Lance Editor	Employer JW Wiley & Sons
Host Parent #2 Last Name 1401 Armstrong Avenue	First Name	Middle Initial Kokomo	Occupation IN	Employer 47903
Home Address (mail address as require for home delivery) 765-852-1456	City	State	Zip Code	
Home Phone Catanddog@hotmail.com	Fax	Host Parent #1 Work Phone	Host Parent #1 Mobile Phone	
Email		Host Parent #2 Work Phone	Host Parent #2 Mobile Phone	

FAMILY MEMBERS/OTHERS RESIDING IN THE HOME

List ALL household members, including host parents
name and middle initial, beginning with parents Relationship Living at Home? (circle) ** Birthdate (require field) Country of Birth

Name and middle initial, beginning with parents	Relationship	Living at Home? (circle) **	Birthdate (require field)	Country of Birth
Mark	Dad	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Month 01 Day 01 Year 1958	U.S.A.
Mary	Mom	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Month 02 Day 02 Year 1961	U.S.A.
Mark, Jr.	Son	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month 05 Day 06 Year 1984	U.S.A.
Patricia	Daughter	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Month 07 Day 04 Year 1988	U.S.A.
Bob	Son	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Month 09 Day 01 Year 1992	U.S.A.
Larry	Son	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Month 11 Day 13 Year 1997	U.S.A.

** Children away at school or the majority of the year should be listed as "no"

PLACEMENT INFORMATION:

- Religious affiliation or preference: Catholic How often do you attend services? weekly monthly occasionally never
Please comment about hosting a participant with a different or no religious affiliation: Student would be welcome to join us or welcome to stay home.
- Is your family willing to host a male female no preference? Due to family structure and housing we cannot host a female male.
- Will the participant share a bedroom? yes no If yes, with whom? (Participant must have a bed of his/her own)
- Does anyone in the family smoke? yes no
What are your feelings about a participant who smokes? no problem okay if outside home prefer not strongly object
- Do you have any pets? yes no If yes, what kind? indoor outdoor
- What language is spoken in the home? English What other languages are known by family members? Latin
- Has your family ever hosted on the AFS program? yes no From which country(ies)? Finland, Venezuela, France, Costa Rica
Year(s)? 2001, 2005, 2007, 2008
Has a family member ever been on an AFS program? yes no
Name Program Year Country

STATISTICAL DATA:

This information will be used for monitoring and tracking purposes and will not be considered in our decision about you being a host family for an AFS Participant. You are not required to respond; however, it would be very helpful if you did. Please check the box or boxes that correspond to the background of your family: African American or Black American Indian Alaskan Native Asian Caucasian Hispanic or Latino Pacific Islander Native Hawaiian Other (please specify)

Please return this form to your local AFS volunteer.
Or, submit to the AFS Admissions Center by
fax (503-961-8388), email (hostfampapers@afs.org), or mail to:
AFS Admissions Center
506 SW 6th Avenue, 2nd Fl

Portland, OR 97204
Phone: 1-800-237-4636