

## **International Community Friends Program**

First Name:	Last Name:
Address:	
Email Address:	
Phone Number:	
What is your occupation:	
Name of the Employer:	
Do you have any internation	al experience?
Have you hosted internation	al students in past? $\square$ Yes $\square$ No
Do you have any Gender pro	ference?:
Who do you have in your fa	mily? □Spouse □ Parents □ Children □ Pets
Why are you interested to h	ost international student (s)?
Do vou have any preference	for nationality? $\Box$ Yes $\Box$ No If ves. Please indicate:

## Any other special requirement you would like students to know?

Activities you are interested to host?

Signat	rure — — — — — — — — — — — — — — — — — — —
results requir	pleted background check is required for participation in this program. Please attach the of a background check conducted in the last thirty (30) days, or sign here and provide the ed additional information if you prefer Arkansas State University – Jonesboro to conduct a round check.
	Others (please indicate type of activity)
	Host Family (temporary stay with family during thanksgiving, Christmas and spring break)
	Host Family (Homestay)
П	Cook at home
	Watch games/sports  Volunteer activities (please indicate type of activity)
	Trips
	Shopping
	Dinner/Lunch
	Family game night
	Movies
П	Family Picnic

Disclaimer: International Community friends program is voluntary and is based on mutual interested and trust between host family and international students. Arkansas State University only facilitates a careful matching process but will not be liable for any incident(s) arising from the relationship. Applicants do hereby, waive any cause of action they may have, in any theory against Arkansas State University for any damages he/she may suffer as a result of his/her participation in the international community friends program and does hereby, agree to indemnify and hold Arkansas State University harmless for the same.