

BCHLA Student Exchange Application Check List

Before submitting your application, please check off the following items to ensure you have not missed anything (PLEASE ENTER YOUR INFORMATION USING A KEYBOARD AS IT IS EASIER TO READ THE INFORMATION THAT YOU PROVIDE).

- You and your parents have read and understand the overview of the exchange program.
- You have filled out all necessary sections of the application.
- You have included a copy of your most recent report card.
- You have completed in detail the “Additional Information” questions 1-9 on page 6.
- Please scan and insert pictures onto page 7 (otherwise glue them on). Do not include loose photos.
- Everyone has read and understands the expectations of participation in the exchange on page 8 of the application.
- You have completed and understand the student statement on page 9
- Your parent(s)/guardian(s) has/have completed and understand(s) the “Parent’s/Guardian’s Statement” on page 10 of the application.
- Your school principal AND liaison teacher have signed page 11 of the application and understand their role and your participation in this exchange.
 - Please note that the liaison teacher could be your language teacher, another teacher at your school or your school counsellor. This individual will act as a contact person at the school for your exchange partner and the BCHLA, if needed.
- The General Waiver has been signed as presented
- Your school liaison teacher is aware of their role -https://bchla.ca/exchange_teachers.htm
- You have made 2 copies of your original application (this excludes making additional copies of the report card, home inspection and waiver).
- You have given the reference form to a teacher/counsellor to be completed and submitted
- You have attached an original passport or passport like photo on the front top right of all copies (please glue them on).
- You have included a cheque or have e-transfered \$950 for the participation fee. Cheques are to be made out to BCHLA and e-transfers can be sent to exchange@bchla.ca. If no match is found, your \$950 will be returned
- You have instructed your reference on how to complete and submit the reference form
- Your home inspection has been completed
- Liaison teacher has been asked to email completed inspection to: exchange@bchla.ca
- Your liaison teacher and your parent(s) have looked over your application to make sure everything is complete
- Put all 3 applications (original and 2 copies) and most recent report card into an envelope and send it via registered mail or courier to:

BC/Germany Exchange Program
c/o Mrs. Anna Das
301-4696 West 10th Ave
Vancouver, BC V6R 2J5



Please attach
a
RECENT
COLOR
PHOTO

BRITISH-COLUMBIA – GERMANY STUDENT EXCHANGE APPLICATION FORM

Note that all the information contained in this form is confidential and will only be viewed by those involved in the matching process. Some portions of the application will be shared with the selected, prospective exchange participants.

APPLICANT	
Surname, given name(s)	
Birthdate (day, month, year)	
Gender (m / f / other)	
Citizenship(s)	
Religious affiliation (if any)	
Height (cm)	
Student email address	
Name(s) of <u>all</u> legal guardians	
Name, address and telephone of your school	
Foreign language skills (language(s) / years)	

FAMILY	
Father's name (age)	
Father's occupation (please be specific)	
Regular working hours (from...to)	
Father's phone at work	
Father's cell phone number	
Father's email address	
Mother's name (age)	
Mother's occupation (please be specific)	
Regular working hours (from...to)	
Mother's phone at work	
Mother's cell phone number	
Mother's email address	
Siblings (gender, names, ages)	
Siblings' emails (if they are 18 years old or over and living with you)	
Other people residing at this address (names, relationships, ages)	
Other people's emails, other than your siblings, residing at this address	

AT HOME	
I live with both of my parents under the same roof (yes / no)	
I live in a single-parent home	
If yes, with which parent do you reside?	
Mailing address (street, city, postal code)	
I live in two separate homes and spend time both at my mother's place and my father's place	
Second mailing address (if any: street, city, postal code)	
Dominant / primary language spoken at home	
Other languages / dialects spoken at home	
Will the family only speak the official language of your country with and around your exchange partner?	
Do you have pets? (yes / no)	
If so, what and how many?	
If you have dogs or cats, please include whether they are shedding or non-shedding.	
Where are the pets kept? (indoors / outdoors)	
Which pets do you have indoors?	
Which pets do you have outdoors?	
Are you expected to do any chores at home? (yes / no)	
If yes, which regular chores are you expected to do?	
How often do you do these and how much time does this take?	

DIETARY INFORMATION	
Describe your typical diet. What do you and your family typically eat for breakfast, lunch, and dinner? Give a few examples for each meal.	
Do you eat spicy food? (yes / no)	
If yes, what level of spice do you eat? (mild / medium / hot)	
Would you be willing to eat a different diet than you normally do while on exchange? (yes / no)	
As a host, would you be willing to prepare and serve food in your house that is contrary to your diet (i.e. vegetarian, vegan, meat, gluten free etc.)? (yes / no)	

ACCOMMODATION	
Do you live in a house, duplex / multiplex, apartment / condo / townhouse, basement suite, or other (please elaborate)	
What is the square footage of the living area of your home?	
Area in which you live (provide details, where possible, to describe where you live, the surrounding area, and distance to your school and nearest neighbours).	
Will the partner have their own room? (yes / no)	
If no, with whom will they be sharing a room?	
Will the student have their own bathroom? (yes / no)	
If no, with whom will they share the bathroom? (yes / no)	
Will anyone have to share a bedroom as a result of hosting an exchange student? (yes / no) If so, who?	
Will you be renting out any part of your home during the time you will be hosting an exchange student (long or short term)? (yes / no)	
If so, what rooms or areas?	
Does/Do your renter(s) have a private entrance to their space? (yes / no)	
Does/Do your renter(s) have access to your living areas? (yes / no)	
Would the student have access to the rental area? (yes / no)	
Are there any shared spaces between you and the renter(s)? (yes / no) If yes, explain.	
Will you be hosting any other students or people in your home while the exchange student is there? (yes / no)	
If yes, list their names and ages and email addresses if they are over 18 years of age.	

FIREARMS	
Are there any firearms in the house?	
If so, are the firearms secured?	
How are they secured? Cable / trigger lock, locked cabinet, container room, other (please explain)	
Who has access to these locks?	
Are firearms and ammunitions stored separately? (yes / no)	
Are firearms loaded while being stored? (yes / no)	

STATE OF HEALTH	
<p>Our primary concern is for the health and safety of our students. Because of the unique situation of being an international student in grade school, it is vital that any physical, emotional, or behavioural conditions (perceived or confirmed) be disclosed so that we can ensure we are able to offer an appropriate program.</p> <p>Please note: Failure to disclose the following information or any other information that can affect programming may result in the termination of the student's exchange.</p> <p>Within the last 24 months, has this student experienced any:</p>	
Physical conditions, such as surgeries, deafness, sight impairment, asthma, diabetes, autism, anemia, mononucleosis, hepatitis, ADHD, mobility difficulties, epileptic seizure, etc.? (yes / no) Please list the conditions which apply and provide details, including the needed medications and dosages.	
Emotional conditions, such as mood instability (depression, anger, mania), self-injury (suicide attempts, cutting, etc.), anxiety (test, separation, etc.), eating disorders (binge eating, restriction of food), traumatic experience (divorce, accident, death), etc.? (yes / no) Please list the conditions which apply and provide details, including the needed medications and dosages	
Behavioural conditions, such as suspension/expulsion from school, addictions (computer, drug, alcohol, gaming), etc.? (yes / no) Please list the conditions which apply and provide details.	
Learning conditions, such as difficulties with math, writing, reading or memory, failure of classes, etc.? (yes / no) Please list the conditions which apply and provide details	
Allergies, such as to cats, nuts, gluten, etc.? (yes / no) If yes, please list the needed medication and dosage.	
The list above is not a complete list. If there are other conditions that are not listed, you are still required to list them. Are there any conditions that could impact programming? (yes / no) If yes, please provide details (you may use an extra sheet).	

SMOKING etc.	
Do <u>you</u> smoke or vape? (yes / no) If so, what and how often? Where does this occur? (i.e. in the house, outside, in the car, at other houses)	
Does <u>anyone</u> in your household smoke or vape? (yes / no) If so, who, what and how often? Where does this occur? (i.e. in the house, outside, in the car, at other houses)	
Do <u>you</u> use any form of cannabis products or mood-altering products (i.e., marijuana, edibles)? (yes / no) If so, what and how often? Where does this occur? (i.e. in the house, outside, in the car, at other houses)	
Does <u>anyone</u> in your household use any form of cannabis products or mood-altering products (i.e., marijuana, edibles)? (yes / no) If so, who, what and how often? Where does this occur? (i.e. in the house, outside, in the car, at other houses)	
Are <u>you</u> willing to abstain from smoking inside the home during a guest's visit? (yes / no / not applicable)	
Is <u>the smoker</u> willing to abstain from smoking inside the home during a guest's visit? (yes / no / not applicable)	
Are <u>you</u> willing to abstain from the use of <u>cannabis products or mood-altering products</u> during a guest's visit? (yes / no / not applicable)	
Is <u>the user of cannabis products or mood-altering products</u> willing to abstain from using these products during a guest's visit? (yes / no / not applicable)	

HOBBIES and RECREATIONAL ACTIVITIES	
Please be specific in these areas. Be sure that the degree of involvement is clear. For example, it is much different to play a musical instrument for personal enjoyment rather than as a member of a band; yet both activities would be listed under musical interest.	
Sports that you practice (hours per week)	
Sports / clubs / activities in which you are involved during the time you will be hosting an exchange student	
Other hobbies that you practice (hours per week)	
Do you play an instrument? (hours per week)	
Sports and other activities that you are willing to participate in	
Sports and hobbies that you are NOT interested in	
Which music do you like to listen to?	
How do you prefer to spend weekends? Please give examples – preferably in order of preference.	
Do you do any volunteer work? Explain.	
Will you be doing volunteer work during the time you are hosting an exchange student? How much time per day / week will this take?	
Do you have a part-time job?	
Will you be working during the time you are hosting an exchange student and if so, how much of your time per day/week will this take?	
Would you work fewer hours or not at all when you are hosting? (yes / no)	
Membership in any youth organization? (Mention if you have an official role with this group.)	

PARTNER	
Would you accept a partner with another religious affiliation? (yes / no – please explain / perhaps – please explain)	
What leisure activities (e.g. sport, concerts, hobbies, etc.) will your partner be able to participate in, maybe even without you?	
What does your family expect from an exchange partner (e.g., certain rules you have in your family)?	

ADDITIONAL INFORMATION

Important: Attach a copy of your latest school report.

Please be very accurate in this section, as we will be using this information to attempt to find a match for you. We will look for similar interests, free time activities, and characteristics with a potential partner. In the past when people have embellished or been untruthful, it has led to issues in the exchange, and on occasion to the termination of the exchange.

Please describe, in as much detail as possible, the following. Please use an extra sheet.

1. Describe your typical week (activities, events, duties, etc.).
2. Comment on your school interests and non-interests.
3. What do you do when you just want to relax?
4. How do you interact with others?
5. How much time do you spend daily on social media? Which social media platforms are you on?
6. Does your family limit your screen time at home, or have any particular rules around the use of your cell phone at home?
7. What are your reasons for wishing to participate in this exchange?
8. What do you think makes you a good exchange partner?
9. Do you have any particular requests of your own (i.e. vegetarian diet, non-smoking home, any restrictions due to health reasons, such as allergies to cats or dogs, etc.)?

PHOTO SHEET

Please submit an additional **digital (electronic) photo sheet** (or more than one if necessary with your application. All photos must be provided electronically.

Include the following photos **in the order listed below** and add a **brief description for each photo**.

Required Photos:

1. You and your family
2. The exchange student's future bedroom
3. Shared living spaces (e.g., kitchen, living room, dining room)
4. The exterior of your home, including front and/or back yards if applicable
5. Your pets (if any)
6. Your school
7. Your hobbies or activities that are meaningful to you

Please note that submitted photos cannot be returned.

EXPECTATIONS OF PARTICIPANTS IN THE BC / GERMANY EXCHANGE PROGRAM

To ensure the best possible outcome of this experience, these are the expectations of participation by the BCHLA and Ministry of Education in Mainz, for you and your family:

Build rapport with your partner and exchange family: You are expected to build a relationship with your partner and their family. This exchange is not a vacation, and you are expected to attend school, spend quality time with your partner and their family, improve your language skills, interact with and integrate yourself into your host family's way of life.

Be adaptable and flexible: you must be willing to adjust to new circumstances, environments and cultural norms. You will experience different ways of life, food, opinions, freedoms or limitations due to public transportation. Be open to the experience and handle unexpected challenges with positivity and resilience.

Be open-minded and curious: embrace the new culture, traditions and perspectives without judgment. The differences you will experience are opportunities to learn, rather than obstacles. Be appreciative of what your host family does for you and make sure to let them know how much you appreciate their kindness, actions, and opportunities and outings they provide to you.

Strong communication skills: make sure to express yourself respectfully and clearly, even across language barriers. Actively listen to your partner and host and ask questions to avoid misunderstandings. Have patience and be respectful with your partner's new language acquisition. Help them acquire or expand their vocabulary and discuss how you would like to have assistance with or assist with language learning.

Confidence and independence: you will need to step outside of your own comfort zone which can include different customs, food and drink, expectations, speaking the country's main language, making new friends, using public transportation etc. All these experiences can lead to personal growth and cultural understanding immediately or post-exchange.

Commitment and responsibility: dedicate yourself to the expectations and cultural goals for the program. Follow the expectations listed in the application form, build a relationship with your partner and their family and get a better understanding of the culture of your host country. Remember that you are a representative of your community and country and your actions will reflect on how people perceive Canadians/Germans to be.

Cultural sensitivity: respect your host country's traditions and values such as cultural diversity, religious celebrations, cuisine, and other ways of life. Make sure to build bridges by appreciating the differences and showing empathy. This experience is a chance to learn new ways of life and build understanding.

Enthusiasm and positivity: approach new experiences with excitement and energy. Do not focus on the negative or how things may be 'better' in your own country. Maintain a positive outlook, even during challenges. Remember that you have a liaison teacher at your school to help you navigate issues that may seem insurmountable.

A reciprocal exchange: exchanges like this aim to foster mutual understanding, respect and collaboration between countries and people. This exchange is not simply about you experiencing another culture, but also about sharing your own traditions, perspectives and values in return. This two-way process enriches both the host, their family and the participant which can lead to lasting connections or at the very least, an experience that transcends borders and builds global citizens.

Failure to meet expectations: unfortunately, there have been times when participants and/or their families have not embraced the true spirit of the exchange. If unresolvable issues occur, the exchange may be terminated, so we encourage all participants to build rapport with their partner and family, be kind, accepting, and meet the goals and expectations of the exchange program as mentioned above.

We have read and understand the goals and expectations of the BCHLA and the Ministry of Education in Rhineland-Palatinate.

Student's signature

Date

Signatures of all legal guardians

Date

STUDENT'S STATEMENT

I understand and agree to the following conditions and realize that any violation may result in my immediate removal from the program. Any additional expenses as a result will be the responsibility of my parents or myself. I have provided complete and accurate information in this application.

Please initial every item.

- . NO smoking or use of cannabis products or mood-altering products (i.e., marijuana, edibles).
- . NO consumption of alcoholic beverages.
- . Absolutely NO use, purchasing or possession of illegal drugs.
- . NO driving of any motor vehicle while in the host country. ICBC driving regulations MUST be followed.
- . I wear a helmet when biking and skiing/snowboarding/riding e-scooters.
- . Laws of the host country MUST be obeyed at ALL times.
- . While in the host country, NO travel is permitted outside the local area unless pre-arranged and approved by parents, host parents, and BCHLA.
- . RESPECT the "house rules" of the host family and customs of the host country and family.
- . School attendance IS mandatory.
- . Doing the best of your ability in all your classes IS mandatory.
- . RESPECT decisions of the program coordinators in resolving any disputes that may arise. Third party participant interference of decisions made by the BCHLA Board could lead up to removal from the program of that third party participant/applicant.

Student's signature

Date

Signatures of all legal guardians

Date

PARENT OR GUARDIAN'S STATEMENT / MEDICAL AUTHORIZATION

I / We understand and agree to the following conditions and realize that any violation may result in the participant's immediate removal from the program. Any additional expenses as a result will be the responsibility of myself /ourselves. I / We have provided complete and accurate information in this application.

Please initial every item.

_____ I / We consent to my/our child's possible participation in this exchange program.

_____ I / We understand and consent that this completed application will be distributed to German host families, the German Ministry of Education, and the host school.

_____ I / We have read the completed application thoroughly and agree with the conditions and with the information presented.

_____ I / We authorize medical attention or treatment for my/our child if judged necessary by the host family.

_____ I / We authorize medical attention or treatment for my/our child if judged necessary by the host school authorities, education officials or medical authorities in the host country.

_____ Suitable accommodation and family environment will be provided for the incoming student, who will be treated as a member of the family.

I / We will provide comprehensive health, accident and liability insurance for my/our child for the travel and exchange period. A copy of all insurance (including third party liability) is to be forwarded to the BCHLA six weeks prior to departure. A comprehensive travel insurance package will be made available through the BCHLA's travel agency.

A criminal background check is mandatory for members of the respective households 18 years and older. When it is clear that the exchange will take place, members of the respective households (18 years and older) will provide an official document stating the status of their criminal background. These documents will not be sent to the exchange partners. BCHLA and the Ministry of Education in Rhineland-Palatinate will get access to the documents and inform their respective partner-organisation about the contents (if any).

Signatures of all legal guardians

Date

PRINCIPAL'S STATEMENT

(Applications without Principal's signature will NOT be accepted)

In my opinion, this student is a suitable ambassador for the school, province, and country and appears to possess the maturity and flexibility required to adapt to an unfamiliar environment for three months. I know the student's family and find it suitable to host a guest over a longer period. (Please add any relevant comments.)

I understand that the German partner will attend my school for ten weeks (September-November), and the BC student will attend school in Germany for ten weeks (March-May). The German school representatives agree to provide the necessary support to the BC student to assist in completion of BC course requirements for the school year, which may involve special arrangements in some cases. The Canadian school representatives also agree to provide support to the German student as required during the ten-week stay.

The following is named as the school liaison teacher and communication may be sent directly to them.

Name of school liaison teacher

Email

Signature

Name of principal

Email

Signature

**FOR THE MINISTRY OF EDUCATION
RHINELAND-PALATINATE, GERMANY**

Heiko Stahl

Ministerium für Bildung

Abt. 3

Mittlere Bleiche 61

55116 Mainz

GERMANY

Email: heiko.stahl@bm.rlp.de

Telefon: +49 6131 / 16 2877

Website: <https://bildung.rlp.de/eu-int>

FOR BRITISH COLUMBIA STUDENTS

Return printed application form to:

Mrs. Anna Das

BCHLA Board Member

301-4696 West 10th Avenue

Vancouver, BC,

V6R 2J5

Canada

Feel free to contact us directly

exchange@bchla.ca

Or

visit our website at

www.bchla.ca

if you have any questions
regarding the exchange

BCHLA BC/GERMANY EXCHANGE PROGRAM GENERAL WAIVER

STUDENT NAME _____

READ CAREFULLY

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISKS AND INDEMNITY AGREEMENT, BY SIGNING THIS DOCUMENT, YOU WILL WAIVE CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE

ACTIVITIES, PROGRAMS, EVENTS AND PERSONS COVERED BY THIS RELEASE AGREEMENT

This release applies to the participation in the BCHLA BC/Germany Exchange Program (the “Program”) and activities associated with the Program.

This Release Agreement applies to and protects the BCHLA and its respective officers, directors, employees, agents, independent contractors, subcontractors, representatives, successors and assigns and all instructors, teachers, school and district administrators, managers, volunteers, sponsors, chaperones, and officers in any way involved or connected with BCHLA and other participants while involved in the Program (collectively the “Releasees”).

ASSUMPTION OF RISKS

I am aware that the Program involves many risks, dangers and hazards, inherent or otherwise, including, but not limited to risk of serious injury or death and negligence on the part of the Releasees, which includes failure by the Releasees to take reasonable steps to safeguard or protect me from injury or from risks, dangers or hazards of participation in the Program or other activities including, but not limited to hosting a foreign student, living with a host family, living in a foreign country (including the risk of threats of terrorism, war, insurrection, natural disaster, pandemic, and Acts of God), school activities, sporting activities, attending events, activities of daily life, and travel to and from such activities (including air travel and travel to and from airports related to Program participation).

RELEASE OF LIABILITY, WAIVER OF CLAIMS AND INDEMNITY AGREEMENT

In consideration of the Release permitting my participation in the Program, I hereby agree as follows:

1. To waive any and all claims that I have or may have in the future against the Releasees arising out of my participation in the Program and to release the Releasees from any and all liability for any loss, damage, expense or injury including death that I, or my next of kin, may suffer during or because of my participation in the Program and/or the activities due to any cause whatsoever, including negligence, breach of contract, breach of

BCHLA BC/Germany Exchange Program
Student application: Teacher & Counsellor reference form

Dear Teacher/Counsellor,

You both have been selected to fill out a reference form for this student to participate in the BCHLA BC/Germany Exchange Program. Please take a few moments to let the selection committee know how well this student would do in such a program. This student would be hosting a German student for 10 weeks in the fall and then going to Germany in the spring to live with them and their family. THIS IS A VERY IMPORTANT DOCUMENT FOR THE PROGRAM. All information remains confidential.

Please email this completed form to exchange@bchla.ca

STUDENT NAME: FIRST _____ LAST _____ CURRENT GRADE: _____

How long have you known this student? 1 2 3 4 5 6 7 8+ years

How well do you know the applicant? *Not Really* *Somewhat* *Well* *Very Well*

Please mark the most appropriate number (1 being 'no' – 10 being 'absolutely')

- I would trust this student to be a good host 1 2 3 4 5 6 7 8 9 10
- This student can get along with others 1 2 3 4 5 6 7 8 9 10
- This student listens to instructions the first time 1 2 3 4 5 6 7 8 9 10
- This student is respectful of all students, teachers, and staff 1 2 3 4 5 6 7 8 9 10
- This student is emotionally mature and mentally healthy 1 2 3 4 5 6 7 8 9 10
- This student responds to classroom stress appropriately 1 2 3 4 5 6 7 8 9 10
- This student can work independently 1 2 3 4 5 6 7 8 9 10
- This student follows through on commitments 1 2 3 4 5 6 7 8 9 10
- This student would be fine being away from family and friends for 10 weeks 1 2 3 4 5 6 7 8 9 10
- This student could complete online coursework while in Germany on their own 1 2 3 4 5 6 7 8 9 10
- I would recommend this student to participate in the exchange 1 2 3 4 5 6 7 8 9 10

This student and their family would provide a safe, caring home for the exchange student: Yes No

Teacher Name (please print): _____ Teacher Signature: _____

Counselor Name (please print): _____ Counselor Signature: _____

Name of School: _____

Additional comments can be added below:

FOR FURTHER INFORMATION ON THE PROGRAM PLEASE GO TO: www.bchla.ca/exchange_about.htm

Home Visit Form British Columbia / Germany Student Exchange Program

Host Family			
Address			
Date of Visit		Home Inspector:	

General Questions

1) Bedrooms	Does the student have their own bedroom?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Does the student have their own bed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Location of bedrooms:		
2) <u>Bathrooms</u>	How many bathrooms are in the home?	# Shared:	# Private:
	Will the student have his/her own bathroom?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) <u>Renovations</u>	Are there any renovations in progress or planned?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	If so, please describe flooring <input type="checkbox"/> kitchen <input type="checkbox"/> bathroom <input type="checkbox"/> painting <input type="checkbox"/> other locations:		
4) <u>Pets</u>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If so, please list:
5) <u>Family Members</u>	How many family members are living in the home?		
	Name:	Age:	Name: Age:
	Name:	Age:	Name: Age:
	Name:	Age:	Name: Age:
6) <u>Other Residents</u>	How many other residents (non-family members) living in the home?		
	Name:	Age:	Relationship:
	Name:	Age:	Relationship:
	Name:	Age:	Relationship:
7) <u>Rental Areas</u>	Do you rent out any part of your home?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	If so, what areas ie. room/s <input type="checkbox"/> basement suite <input type="checkbox"/> other:		
	Does your renter/s have a private entrance to your home?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	Does your renter/s have access to your home?		Yes <input type="checkbox"/> No <input type="checkbox"/>
	Would the student have access to the rental area?		Yes <input type="checkbox"/> No <input type="checkbox"/>

Notes

Student's Bedroom Inspection

1) <u>Bedroom Windows</u>	Is the bedroom window a legal size? (must measure 24" high by 24" wide or larger)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2) <u>Bed</u>	Does the bed have a proper mattress and frame? (no futons)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) <u>Furniture</u>	Does the room have a dresser, desk and chair?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4) <u>Closet</u>	Does the room have a closet?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5) <u>Heating System</u>	What type of heating system is in the bedroom?	<input type="checkbox"/> gas forced air with vents	
		<input type="checkbox"/> electric baseboards/heaters <input type="checkbox"/> heat pump <input type="checkbox"/> geo thermal <input type="checkbox"/> wood stove	

Inspection Check List

1) <u>Smoke Detectors</u>	On all floor levels?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are they working?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2) <u>CO2 Detectors</u>	On all floor levels?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Are they working?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3) <u>Fire Extinguishers</u>	In the Kitchen?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	By wood burning stove or fireplace?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4) <u>Fire Escape Plan</u>	Is plan In place?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Escape ladder required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5) <u>Emergency Numbers</u>	911 (& others) - Posted close to the phone or on the fridge?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
6) <u>Exits</u>	Are the exits clear?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
7) <u>Fire Arms in House</u>	Are there firearms stored in the house?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
	If so, what room/s are they kept?					
	How are firearms secured?	<input type="checkbox"/> trigger/cable lock		<input type="checkbox"/> locked in a cabinet, container, room		
	Who has access to the locks?					
	Are the firearms and ammunition stored separately?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
8) <u>Harmful medications</u>	Are prescription drugs, etc. properly stored?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Are they stored in the student's bathroom?				Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Are they stored in public areas of the house?				Yes <input type="checkbox"/>	No <input type="checkbox"/>

Notes

Host Family Signature	Host Family Signature
Homestay Coordinator Signature	Date