

**On-Site Host
Information Form**

Host Name:

Address:

City, State, Zip:

Phone: _____ v/tty _____ Email: _____

Pager:

People in household: (how many? male or female? ages?)

Pets in the household: (what type and how many)

Smoking Non-smoking

Number of students you can host: _____

Send application to: PInES P.O. Box 153348 San Diego, CA 92195

APPLICATION MUST BE POSTMARKED BY APRIL 5, 2004

---To be completed by PInES staff---

Home visit checklist:

Date: _____

Number of bedrooms: _____ Number of bathrooms: _____

own rent

separate bedroom for PInES student(s) which includes the following:

bed desk chair lamp

requirements explained to host (provide breakfast, amount of stipend, etc.)/contract signed

student access to TV and VCR. Please describe (nights, weekends only, etc.): _____

General appearance of household:

Inside:

Outside:

Signature of Interviewer: _____