



*(Part II when filled in contains Privacy info – Do NOT duplicate)*  
**Rotary Youth Exchange - Student Protection Program**  
**Host Family – Background Check & Waiver (Part II)**

Effective 11/26/2010

Rotary District 6650

**Rotary Club Name:** \_\_\_\_\_ **Country being hosted:** \_\_\_\_\_

Rotary is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, Rotarians' spouses, partners, Host Families and any other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

**1. PERSONAL INFORMATION FAMILY SURNAME(S)** \_\_\_\_\_

**A. Host Parent/Father or Partner Rotary Member?**   Y,   N    **B. Host Parent/Mother or Partner Rotary Member?**   Y,   N

Name: _____ DOB (dd/mm/yr) _____
Home Phone: _____ Work Phone: _____
Fax: _____ Cell: _____
Email: _____
Address: _____
City: _____ State: _____ Zip: _____
Country of birth _____
If lived at address less than 3 years use additional sheet

Name: _____ DOB(dd/mm/yr) _____
Home Phone: _____ Work Phone: _____
Fax: _____ Cell: _____
Email: _____
Address: _____
City: _____ State: _____ Zip: _____
Country of birth _____
If lived at address less than 3 years use additional sheet

1. Have you ever been convicted of or pleaded guilty to any crime(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe in full. Include date(s) of crime(s) and in which country and state each took place. (Attach separate sheet if necessary) _____

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2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe in full. Include date(s) of crime(s) and in which country and state each took place. (Attach separate sheet if necessary) _____

**2. If employed, provide current Employment History:**

**Applicant A** - Current employer: \_\_\_\_\_, Supervisor's name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Applicant B** - Current employer: \_\_\_\_\_, Supervisor's name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

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**3. ABOUT OUR FAMILY**

a. Financial Resources: Average Annual Income Range:

\_\_\_\_\_ Less than \$25,0000    \_\_\_\_\_ \$25,000 - \$35,000    \_\_\_\_\_ \$35,000 - \$45,000  
\_\_\_\_\_ \$45,000 - \$55.000    \_\_\_\_\_ \$55,000 - \$65,000    \_\_\_\_\_ \$65,000 - \$75,000  
\_\_\_\_\_ \$75,000 and above

*“The income data collected will be used solely for the purposes of ensuring that the basic needs of the exchange students can be met, including three quality meals and transportation to and from school activities” (ref Dept. of State 22CFR 62 (j) (2) )*

b. Does anyone in your home receive Needs-based Gov’t Assistance - Food stamps, Housing funds \_\_\_\_\_ Yes, \_\_\_\_\_ No

c. Do you have pets in your home? #\_\_\_\_\_ Cat(s), #\_\_\_\_\_ Dog(s), #\_\_\_\_\_ Other(s) \_\_\_\_\_

d. Does anyone in the home smoke? \_\_\_\_\_ Yes \_\_\_\_\_ No If Yes, is the smoking area in home limited \_\_\_\_\_ Yes \_\_\_\_\_ No

e. Family Travel: Have any Family members traveled abroad? If so, tell us whom and where they traveled. \_\_\_\_\_

f. Community Activities: What community activities are family members involved in \_\_\_\_\_

g. Is the home also used as a business? \_\_\_\_\_ Yes, \_\_\_\_\_ No; If Yes, describe \_\_\_\_\_

h. Does anyone in the home have an alcohol or other drug addiction problem? \_\_\_\_\_ Yes \_\_\_\_\_ No



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**Host Family Member Background Check  
Additional Adult Addendum(s)**

To be completed for each **additional adult (18 years of age or older)** living full or part-time in the home during the hosting period (legal residence) of the applicant(s). **NOT THE HOST FATHER or MOTHER**  
Copy as needed

**Host Parent Surname(s)** \_\_\_\_\_

Additional Applicant Name: \_\_\_\_\_ DOB (mm/dd/yr) \_\_\_\_\_

Relationship to other members of household: (son, daughter, etc.) \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal code \_\_\_\_\_

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**If employed, provide Employment History: (If less than 3 years identify additional on separate sheet)**

Current employer: \_\_\_\_\_, Supervisor's name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Personal References:**

1. Name \_\_\_\_\_, Relationship: \_\_\_\_\_

Address/city/state/zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

2. Name \_\_\_\_\_, Relationship: \_\_\_\_\_

Address/city/state/zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

3. Name \_\_\_\_\_, Relationship: \_\_\_\_\_

Address/city/state/zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Criminal History:**

1. Have you ever been convicted of or pleaded guilty to any crime(s)? \_\_\_ Yes \_\_\_ No

If yes, describe in full. Also indicate dates) of crime(s) and in which country and state each took place. (attach a separate sheet if needed).

2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic or civil violence or civil harassment injunction or protective order? \_\_\_ Yes \_\_\_ No

