



A non-profit tax-exempt educational foundation

Academic Foundation *for* International Cultural Exchange

7242 La Jolla Blvd, La Jolla, CA 92037
Telephone: (858) 455-0302 Fax: (858) 455-0335

JUNE CONTACT SHEET

(due by student's return)

Student Name _____ Community Rep Name _____

Host Family Name _____ Date of Student Contact _____

School Name _____ Date of Host Family Contact _____

Nationality/State _____ Date of School Contact _____

1. Did the student do anything special with the host family as a farewell? _____

2. Did the student enjoy their exchange experience? _____ Please explain: _____

3. What were the host family's feelings about this experience? _____

4. Would the host family like to host again next year? _____

***If yes, have the family begin completing a new host family application and give them some student profiles to look over*

6. Was the school satisfied with this experience? _____ Can a slot be reserved at the school now for next year? _____

_____ If not, when is the earliest date to contact them about securing a "slot" for next year? _____

FINAL ASSESSMENT

How was the student's adjustment to the American lifestyle?

Excellent Good Fair Poor

How was the student's relationship to the American high school?

Excellent Good Fair Poor

How was the student's relationship to the host family?

Excellent Good Fair Poor

How was the student's relationship to the Community Representative?

Excellent Good Fair Poor

Signature of Community Representative _____

Date Submitted _____

***Community Representative must send this form to the AFICE National Office by the date indicated above*