

Rep	 	
Area		
Coordinator		
Date of		
Placement	 	
Arrival Airport		
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STUDENT PLACEMENT SHEET

Student Name			Birthdate	<i>_</i>		
Last	First	Middle	Month	Day Year		
GenderCountry			Program Year			
Host Family Info:			School Info:			
Name			Name			
Street Address			Street Address			
City, State, Zip			City, State, Zip			
Home Phone			School Contact/Phone			
Work Phone			/	/	End Doto	
Host Dad Occupation			School Start Date School End Date School Approval:			
Host Dad SS# Bir	thdate			57 1 1 5		
H. d. Mars O. amardan			Written □	Verbal □		
Host Mom Occupation			Oder Adda In Prince		37	NT.
Host Mom SS# Bir	thdate		Other Adults living in the home? Yes No If yes, names, birthdates and SS#'s:		No	
# of children/Names and Ages						
Community Profile:						
Date Community Representative Noti	ified Host Family	of Confirmed Plac	eement:	//		
Date Community Representative Noti	ified Area Coordi	inator of Confirme	d Plcmt:	<i></i>		
For AFICE National Office Use Only: Need Student Approval before confirming p If yes, please if		Double Placement	Single Host Par	ent Othe	er	
Date Student A	Approval Rec'd:	//	<u> </u>			
Date Placement Faxed Overseas:/	/					
Date Host Family Welcome Letter Mailed _						
Date Background Check Completed:	//					