

# YOUTH 4-H EXCHANGE APPLICATION FOR OUT-OF-STATE Valley County

THIS SPACE FOR YOUR PERSONAL  
PHOTO  
(MAY BE INFORMAL)

TRIP DATE \_\_\_\_\_

**PLEASE PRINT OR TYPE**

NAME:	GENDER	GRADE	AGE( AS OF 10/1/2010)
ADDRESS:			
PHONE:	E-MAIL ADDRESS:		
MOTHER'S NAME	DAYTIME PHONE:		
FATHER'S NAME	DAYTIME PHONE:		

**OTHERS IN HOME**

NAME	GENDER	BIRTH DATE	HOBBIES/INTERESTS/PERSONALITY TRAITS

LOCATION OF HOME:    \_\_\_ Town    \_\_\_ Rural Non-Farm    \_\_\_ Farm    \_\_\_ Ranch

DOMESTIC ANIMALS: \_\_\_\_\_

FARM ANIMALS: \_\_\_\_\_ TYPES OF CROPS: \_\_\_\_\_

ARE ANIMALS ALLOWED IN THE HOUSE? \_\_\_ YES    \_\_\_ NO

FAMILY INTERESTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CHECK BOXES WHICH APPLY:**

\_\_\_ SMOKING HOUSEHOLD    \_\_\_ NON-SMOKING HOUSEHOLD    \_\_\_ SMOKING FORBIDDEN IN OUR HOUSE

\_\_\_ SINGLE FAMILY HOUSE    \_\_\_ APARTMENT    \_\_\_ MOBILE HOME

ARE SPECIAL HEALTH CONSIDERATIONS IN THE FAMILY? \_\_\_ YES    \_\_\_ NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

\_\_\_\_\_

WOULD YOUR OUT-OF-STATE DELEGATE BE EXPECTED TO ATTEND CHURCH WITH YOU?

\_\_\_\_YES \_\_\_\_NO \_\_\_\_OPTIONAL RELIGION (OPTIONAL) \_\_\_\_\_

HAS YOUR FAMILY HOSTED AN EXCHANGE PARTICIPANT BEFORE? \_\_\_\_YES \_\_\_\_NO

NAME	NAME OF PROGRAM	YEAR

WHAT PREVIOUS TRAVEL EXPERIENCE HAVE YOU HAD?

STATE OR COUNTRY	LENGTH OF STAY	YEAR	PURPOSE (Vacation, Exchange, etc.)

WHAT ARE YOUR HOBBIES AND SPECIAL INTERESTS? \_\_\_\_\_

\_\_\_\_\_

WHAT ARE YOUR FAVORITE SUBJECTS IN SCHOOL? \_\_\_\_\_

\_\_\_\_\_

WHAT 4-H PROJECTS HAVE YOU TAKEN? \_\_\_\_\_

\_\_\_\_\_

WHAT ACTIVITIES DO YOU ENJOY?

STUDYING		SHOPPING		SINGING		COOKING		GAMES		SPORTS	
EATING		SWIMMING		MUSIC		TENNIS		WALKING		OTHER	

YOUR PERSONALITY CHARACTERISTICS:

TIDY		TOLERANT		LAUGH A LOT		SOCIABLE		PATIENT		EMOTIONAL	
SHY		CURIOUS		QUIET		SERIOUS		CHEERFUL		TALKATIVE	

WHAT DO YOU USUALLY DO IN YOUR FREE TIME?

MOVIES		SHOPPING		STUDYING		VIDEO/ GAMES	
READING		MUSEUMS		SPORTS EVENTS		PHONE CALLS	

## WHAT TYPE OF TV PROGRAMS DO YOU ENJOY WATCHING

EDUCATIONAL		MOVIES		MUSICALS		SPORTS	
GAME SHOWS		NEWS		DRAMA			
COMEDIES		ADVENTURE		NONE OR VERY LITTLE TV			

## WHAT KIND OF BOOKS DO YOU ENJOY?

SCIENCE FICTION		CLASSICS		NON-FICTION		POETRY	
MYSTERIES		TEXT BOOKS		FICTION		OTHER	

## WHAT TYPE OF MUSIC DO YOU ENJOY?

CLASSICAL		COUNTRY & WESTERN		JAZZ		FOLK		NONE	
DISCO		SHOW-TUNES		ROCK		POPULAR			

## WHAT QUALITIES DO YOU VALUE MOST IN PEOPLE?

LOYALTY		POLITENESS		DECISIVENESS		SENSE OF HUMOR	
PATIENCE		KINDNESS		HONESTY		INTELLIGENCE	

## I/WE UNDERSTAND/CONFIRM THAT AS A HOST FAMILY: (PLEASE INITIAL)

- \_\_\_\_\_ Our family will be expected to treat the out-of-state delegate as one of the family members. The delegate will be included in all family activities and will be informed of family rules and responsibilities.
- \_\_\_\_\_ Arrangements will be made for the out-of-state delegate and host to participate in all designated group activities during the exchange.
- \_\_\_\_\_ Orientation session(s) will be held and orientation materials will be sent to us. We are expected to read the information and familiarize ourselves with this material in preparation for the exchange.
- \_\_\_\_\_ Family must be flexible while hosting and must keep the safety of the out-of-state delegate in mind at all times. All family members must make sure the delegate feels comfortable around friends and family and feels included in activities.
- \_\_\_\_\_ No member of our family has ever been convicted of child abuse, drug abuse, or any other felony criminal offense.
- \_\_\_\_\_ We will contact our county exchange coordinator, and/or Extension Agent immediately if illness or a problem/concern is evident.
- \_\_\_\_\_ Our family agrees and understands that this is a two-year (2) commitment.
- \_\_\_\_\_ Youth will be included as part of the family activities and will participate in meals provided by host family.

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

4-H PARTICIPANT  
SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_