



David M. Apatang
Mayor of Saipan

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS
OFFICE OF THE MAYOR
MUNICIPALITY OF SAIPAN

2nd Floor Ladera Center Building, Beach Road, Oleai
P.O. Box 501457 Saipan, MP 96950

Tel: (670) 234-6208 • Fax: (670) 234-1190 • Email: saipanmayorsoffice@gmail.com



Host Family Application Form

Hafa Adai! Thank you for your interest in hosting exchange students from Japan. We are confident that this will be a very rewarding experience for you and your family. Please fill out the Host Family Application form and return it to our office or via fax at 234-1190. One of our staff will be contacting you shortly. Thank You!

Information we receive will be confidential, unless otherwise required by law.

HOST PARENTS INFORMATION			
Full Name of Host Father (HF)		Full Name of Host Mother (HM)	
HF Employer		HM Employer	
HF Occupation/Position		HM Occupation/Position	
HF E-mail Address		HM E-mail Address	
Level of Japanese: () Beginner; () Intermediate; () Professional		Level of Japanese: () Beginner; () Intermediate; () Professional	
HF Business Phone No.	HF Cell Phone No.	HM Business Phone No.	HM Cell Phone No.
HF Date of Birth	HF Country of Birth	HM Date of Birth	HM Country of Birth
Mailing Address		Physical Address (Village & Street Name)	
SAIPAN, MP 96950		HOME Tel. No.	Other Contact No.

OTHER FAMILY MEMBERS & RESIDENTS INFORMATION					
	Names of all children and any other persons living in your home	Sex	Age	Grade/ Occupation	Relationship
1					
2					
3					
4					
5					
6					
7					
8					

Please indicate Exchange Program applying for				
[]	[]	[]	[]	[]
KSKK	Sanpo-En	Itoda	Johoku-Koto	Noriebetsu
Date: July 28 to Aug. 04, 2014	July 30 to August 5, 2014		Nov. 17 to 21, 2014	
(1 week homestay)		(5 days)	(5 days)	
Ages 9-14	Ages 11-18			
Number of students able to host:		Preference:	<i>Will you be able to sponsor a Chaperon?</i>	
2 students []		Male []	<i>If so, please select your preference.</i>	
3 students []		Female []	(1) Male []	(1) Female []
4 students []			Doesn't matter []	

Do you know of any other families that may be interested to host students? If so, please list their contact information.

During the exchange:

- Please provide a safe and welcoming environment for trust and friendship to develop between the student(s) and your family.
- Support and make the student feel like part of the family, with the same privileges and obligations.
- Gently encourage the student to learn and adopt most of the ways of your household.
- Ensure the student knows how to contact family members, friends, and other support networks.
- Teach the student about the local culture and learn about the student's culture as well.
- Exercise supervisory and parental responsibility to ensure students well being.
- Voice any concerns and questions regarding the student to the accompanying Chaperon or Mayor's Office, including serious homesickness, difficulty adapting or illness.

At least one host parent shall sign below on behalf of the entire household. Your signature below verifies that the information included in the host family application is accurate and complete as of this signing.

The undersigned acknowledges that the Office of the Mayor of Saipan may request or conduct background checks of the undersigned's family, including records of government authorities.

By signing below, I hereby acknowledge that the information provided herein is true and correct to the best of my ability.

Host Parent Print Name/Signature

Date

PLEASE SKETCH A MAP SHOWING DIRECTIONS TO YOUR RESIDENCE BELOW

STREET NAME: _____ **VILLAGE:** _____

A large, empty rectangular box with a thin black border, intended for the respondent to sketch a map showing directions to their residence. The box occupies the majority of the page below the text fields.