Thank you for your interest in IIP’s cultural exchange program for schools. Please provide as much detail as possible. This will help us find a suitable candidate for your school as well as help the participant prepare before their visit. Please consult our Program Guide for further information or visit [www.interntraining.com](http://www.interntraining.com).

**HOST SCHOOL INFORMATION**

**SCHOOL DETAILS**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** |  | | | | | |
| **Address** |  | | | | | |
| **Main City** |  | | | **Distance** | | *(to nearest city)* |
| **Locality** | Urban　 Suburban  Rural | | | **Transport** | | Bus　 Train  Private Car |
| **Telephone No.** |  | | | **School Fax** | |  |
| **School Email** |  | | | **Website / URL** | |  |
| **Principal** |  | | | | | |
| **Telephone No.** |  | | | | | |
| **Email** |  | | | | | |
| **Host Teacher** | Mr. Mrs. Ms. Dr. | | | | | |
| **Telephone No.** |  | | | **Mobile No.** | |  |
| **Email** |  | | | **Alternative Email** | |  |
|  | | | | | | |
| **School Type** | Public/ State  Private  Independent　 Boarding | | | | | Kindergarten |
| **Population** | **Students** |  | **Staff** | |  | Elementary / Primary |
| **Age Range** | **Youngest** |  | **Oldest** | |  | Middle / Jr. High School |
| **Gender** | Male  Female  Coed | | | | | High / Secondary School |
| Please describe the ethnic diversity of your school / community | | | | | | |
| Which languages are spoken in your school / community? | | | | | | |
| **If you are interested in hosting a visit related to special education, please provide a brief overview of the special education programs / services at your school.** | | | | | | |
|  | | | | | | |

**VISITOR PREFERENCES**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Male  Female  Either | | **Dependents** | | We can accept a participant with a child  No children | | | | | |
| **Schedule & Duration** *(Please note we cannot always match exact schedule and duration choices)* | | | | | | | | | |
| Ideal duration | **12 months** | | **9 months** | | | **6 months** | **3 months** | | **Other:** |
| Starting dates | **1st choice:** | | | | **2nd choice:** | | | **3rd choice:** | |
| **Are there any summer programmes or activities the participant could support or join?** | | | | | | | | | |
| Details: | | | | | | | | | |
| **Are you planning to co-host the participant with another school?** *(Please give school contact details below)* | | | | | | | | | |
|  | | | | | | | | | |

**CULTURAL EXCHANGE**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Which Asian countries have been introduced in your school?** | | | | | | | | | |  | | | | | | |
| **Has the school hosted an IIP participant before?** *(Please give the year and names of any participants below)* | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **Does your school currently offer any Asian language courses?  No  Yes** *- Please detail below* | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| **How would your school / community like the visitor to be involved?** | | | | | | | | | | | | | | | | |
|  | **Cultural Presenter –** please detail below | | | | | | | | | | | | | | |
|  | **Language Teaching –** please detail below | | | | | | | | | | | | | | |
|  | **Special Education –** please detail below | | | | | | | | | | | | | | |
|  | **General Teaching Assistant –** please detail below | | | | | | | | | | | | | | |
| **Which traditional and cultural aspects you would like your participant to introduce?** | | | | | | | | | | | | | | | | |
| **Language:** | | | Beginner | | | Elementary | | | | | Intermediate (Dialog) | | | | Advanced | |
| **Arts & Crafts:** | | | Calligraphy | | | Paper Folding | | | | | Traditional Cuisine | | | | Costumes | |
| **Performances:** | | | Tea Ceremony | | | Dance / Drama | | | | | Music | | | | Instruments | |
| **Sports & Games:** | | | Self-Defense | | | Traditional Games | | | | | Festivals | | | | Events | |
| **Society:** | | | School Life | | | Housing | | | | | Daily Life | | | | Politics | |
| Details / Requests: | | | | | | | | | | | | | | | |
| **Hours / Week:** | | | | **Grades:** | | | | **Class Size:** | | | | | **Class Length:**(mins) | | |
| **Language Teaching (Visitor’s Native Tongue)** | | | | | | | | | | | | | | |
| Beginner (Words) | | | Elementary (Phrases) | | | Intermediate (Dialog) | | | | | Advanced (Discussion) | | | |
| Details / Requests: | | | | | | | | | | | | | | |
| **Hours / Week:** | | | | **Grades:** | | | **Class Size:** | | | | | **Class Length:**(mins) | | |
| **Special Education Assistant - How will the participant be utilized?** | | | | | | | | | | | | | | |
| Details / Requests: | | | | | | | | | | | | | | |
| **Hours / Week:** | | | | **Grades:** | | | **Class Size:** | | | | | **Class Length:**(mins) | | |
| **General Teaching Assistant – please indicate subjects / teaching areas** | | | | | | | | | | | | | | |
| Details / Requests: | | | | | | | | | | | | | | |
| **Hours / Week:** | | | | **Grades:** | | | **Class Size:** | | | | | **Class Length:**(mins) | | |

**RESOURCES AVAILABLE FOR THE VISITOR TO USE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Work Area** | Office Space  Staff Room  Class Room  Other: | | |
| **Facilities** | Overhead Projector  Computer  DVD / Video  Other: | | |
| Internet | Wired  Wi-Fi  No Internet | | |
| **Which languages are required?** | | in class: | English  Participant’s Mother Tongue  Other: |
| in school: | English  Other: |
| If there are any materials or resources left from a previous participant, please give details below: | | | |
|  | | | |

**SCHOOL CALENDAR**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Term 1** | Start: | End: | **Term 3** | Start: | End: |
| **Term 2** | Start: | End: | **Term 4** | Start: | End: |

**ARRIVAL INFORMATION**

|  |  |
| --- | --- |
| Please indicate the most convenient point of arrival | Airport  Train Station  Bus Station  Other: |
| **Place Name:** | **Location:** |
| Details: | |

**FURTHER DETAILS**

|  |
| --- |
| Please use this space to tell us anything else that would help us coordinate a placement for your school |

**HOST SCHOOL ACKNOWLEDGEMENT**

|  |  |  |
| --- | --- | --- |
| Please refer to the ‘Program Guide for Hosts’ for the following: | | |
| I acknowledge that I have read and understand our responsibilities as the ‘Host School’, which are outlined in the ‘International Presenters – Program Guide for Hosts’\*.  **We agree to:**   * Assist in finding the participant suitable accommodation on the condition they contribute an **agreed amount\*** per week/month. \* Fee is negotiable and will be finalized prior to the placement. If your school is providing a homestay, please discuss with your host families and your IIP contact. If the amount has already been agreed, please enter here: **$      CAD per month**. IIP’s benchmark is that host family contributions start from **$300 CAD** per month – please bear in mind the participant is unpaid and will be contributing cultural enrichment to school and community. We greatly appreciate your consideration. \*\* Note: The fee will be paid directly to the host family unless otherwise agreed. * Provide free lunches for every school day worked. * Arrange the participant’s transportation to and from school.   \* IIP’s program guidance can be found online:  Program Guide for Hosts: <http://interntraining.com/docs/IIP_Program_Guide.pdf>  Guide for Host Families: <http://interntraining.com/docs/IIP_Guide_for_Host_Families.pdf> | | |
| **Date** | **Name** | **Position** |

**Please return to your IIP Program Coordinator**

**Email:** canada@internship.or.jp | **Fax:** 011-81-3-5750-7712

### HOST FAMILY INFORMATION

**Please note:** It is IIP’s policy not to place female participants in single male / male participants in single female households.

|  |  |  |  |
| --- | --- | --- | --- |
| **Host School Name** |  | | |
| **School contact person for host family** |  | | |
| **I / We are the 1st  2nd  3rd  host family.** | | From: | Until: |

KEY CONTACT

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | Mr. Mrs. Ms. Dr. | | |
| **Relationship** | Parent of Student  Teacher at Host School  Employee at Host School  Other: | | |
| **Occupation** |  | **Employer** |  |
| **Home Phone** |  | **Mobile Phone** |  |
| **Work Phone** |  | **Email** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Address** |  | | |
| **Phone** |  | **Fax** |  |
| **Main City** | *(nearest)* | **Distance** | *(to nearest city)* |
| **Locality** | Urban　 Suburban  Rural | **Transport** | Bus　 Train  Private Car |
| Other Details | | | |

**OTHER CONTACT**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | Mr. Mrs. Ms. Dr. | **Relationship** |  |
| **Occupation** |  | **Phone** |  |
| **Employer** |  | **Email** |  |

**OTHER HOUSEHOLD MEMBERS**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | M/F | Age: | Relationship: |
| Name: | M/F | Age: | Relationship: |
| Name: | M/F | Age: | Relationship: |
| Name: | M/F | Age: | Relationship: |

**HOUSEHOLD AND PREFERENCES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Which language is generally spoken in the home?** | | | | | English  Other/s: | |
| **Are you currently hosting or have you hosted an exchange visitor before?** | | | | | No  Yes - *Please give details below* | |
|  | | | | | | |
| **If the visitor was hosted through IIP, please give the following details:** | | | | | | |
| Year: | Name: | | | Nationality: | | Months: |
| Year: | Name: | | | Nationality: | | Months: |
| **PREFERENCES** | | | | | | |
| **Gender** | | Male  Female  Either | | | | |
| **Nationality** | | Japanese  Korean  Chinese  Thai  Other: | | | | |
| **I/We  can /  cannot accept a participant with a child** | | | Comment: | | | |
| **There are  smokers /  non-smokers in our house** | | | **Smoking is  allowed /  not allowed in the house** | | | |

**AMENITIES**

|  |  |
| --- | --- |
| **There is a  personal /  shared *bedroom* available** | **There is a  personal /  shared *bathroom* available** |
| **Is Internet available?** | Wired  Wi-Fi  No Internet |
| **Can the visitor use the host’s computer?** | Yes  No |
| **Internet is also available at:**  (e.g. library, school) | |
| Other Amenities/Details: | |

**FAMILY LIFE**

|  |  |
| --- | --- |
| **Regular Family Activities** *(Please list any hobbies, community activities, etc., the visitor join in with)* | |
|  | |
| Does the family keep any pets? | Dog/s  Cat/s  Poultry  Farm Animals  Reptiles  Other: |
| **Are any of these indoor pets?** | No  Yes *(Please give details below)* |
|  | |
| **Please provide any important information relevant to your family/household that the visitor should be aware of in advance**  *(Family rules, special diets, religious practices, etc.)* | |
|  | |

**VACATION / HOLIDAYS**

|  |  |
| --- | --- |
| Note: Both accommodation and activity are the participant’s responsibility during extended school breaks, however; | |
| **Is there a possibility of arranging activities with/for the participant?** | Yes  No |
| **Is there a possibility the participant could stay in your house over the vacation period?** | Yes  No |

**CULTURAL ACTIVITIES**

|  |
| --- |
| **What kind of cultural/learning activities are there in your local area?** *(Community colleges, language schools, museums, etc.)* |
|  |

**ARRIVAL INFORMATION**

|  |  |
| --- | --- |
| Please indicate the most convenient point of arrival | Airport  Train Station  Bus Station  Other: |
| **Place Name:** | **Location:** |
| Details: | |

**HOST FAMILY ACKNOWLEDGEMENT**

|  |  |
| --- | --- |
| Please refer to the ‘Program Guide for Hosts’ for the following: | |
| As the “**Host Family**”, I acknowledge that I have read and understand our responsibilities as outlined in the ‘International Presenters – Program Guide for Hosts’\*  **For the duration of the participant’s stay, we agree to:**   * Treat the participant as a member of the family and offer a home stay as enriching as possible. * Provide room and board, including all meals (except lunch on school days) and utilities, for which the participant will contribute **the agreed amount of $      CAD** per month to help defray living expenses. \* Fee is negotiable and will be confirmed prior to finalizing the placement with the school – please consult the school contact person for details. \*\* Note: The fee will be paid directly to the host family unless otherwise agreed. * Discharge the visitor without any hindrance should any event occur which prompts IIP or the visitor to terminate the stay.   \* IIP’s program guidance can be found online:  Program Guide for Hosts: <http://interntraining.com/docs/IIP_Program_Guide.pdf>  Guide for Host Families: <http://interntraining.com/docs/IIP_Guide_for_Host_Families.pdf> | |
| **Date** | **Name** |

**ADDITIONAL DETAILS**

|  |  |
| --- | --- |
| *Please use this space to write a message for the visitor or add any further helpful information/family photos, etc.* | |
|  | |
| **Useful Websites:** | www. |
| www. |

**Please return to your IIP Program Coordinator**

**Email:** canada@internship.or.jp | **Fax:** 011-81-3-5750-7712