



# HOST FAMILY HOME INSPECTION

(Please print in ink or type)

District 5500

Inspection Date: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Host Club: \_\_\_\_\_

Overall Condition of Home: \_\_\_\_\_

Pets in Home: \_\_\_\_\_ cats \_\_\_\_\_ Dogs \_\_\_\_\_ other(s) \_\_\_\_\_

Adult person(s) smoking in the home: \_\_\_\_\_

If yes, where: \_\_\_\_\_

### Home Features:

# Bathrooms: \_\_\_\_\_ #Bedrooms: \_\_\_\_\_ Kitchen: \_\_\_\_\_ Family areas: \_\_\_\_\_

Laundry: \_\_\_\_\_ Pool/hot tub: \_\_\_\_\_ Other: \_\_\_\_\_

Student will have own : bedroom: \_\_\_\_\_ bed: \_\_\_\_\_ bathroom: \_\_\_\_\_

If not, describe the arrangements: \_\_\_\_\_

### Bedroom Amenities:

Bed: \_\_\_\_\_ Window: \_\_\_\_\_ Closet: \_\_\_\_\_ Desk: \_\_\_\_\_

Bookcase/Shelves: \_\_\_\_\_ Good Lighting: \_\_\_\_\_ Electrical Outlets: \_\_\_\_\_

Heat: \_\_\_\_\_ Ceiling Fan: \_\_\_\_\_ TV: \_\_\_\_\_ Phone: \_\_\_\_\_

Additional Comments : \_\_\_\_\_

Inspected by:

&

Name

date

Name

date

**ALL HOST FAMILY INSPECTIONS ARE TO BE CONDUCTED, SUBMITTED AND APPROVED BEFORE STUDENT MOVES INTO NEW HOME**

**Please send by mail, email or fax to:**

Cassie Moyers, Inbound Chair

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