## **Student Request for Host Family 2016-2017**

Texas Academy of Mathematics and Science ◆

University of North Texas

To be	completed by the	academy student. This information	on will be released to my host family.		
Stude	nt's name:		Male / Female Birth date		
Father's name:		Mother's na	Mother's name:		
Addre	ss/City/State/Zip:				
Home	Phone:	Dad Work:	Mom Work:		
		Information (if applicable): Spouse's	name:		
Addre	ss/Citv/State/Zip:				
Home	Phone:	Dad Work:	Mom Work:		
			n the basis of sex, religious preference, ar u feel comfortable answering.	nd/or	
1.	RELIGIOUS AFFILIATION:  My religious affiliation is:  I attend my place of worship: regularly sometimes never  I would like to join a youth group in Denton: yes no  It is important to me that the host family to which I am assigned attend a similar place of worship as mine: yes not necessarily no				
2.	HOME ENVIRO How many broth		Please list their names and ages:		
		etropolitan area suburb round is: White Hispan		Other.	
3.	If you already kn	low of a family in the DFW area	who you might like as a host family, pleas	e	
	give their name,	address, and phone number			
4.			ny student you would like as your partner i		
5.		y dietary restrictions (i.e., diabete es Please specify	es, allergies, etc.)?		
6.		y medical conditions your host fa	amily should know about (i.e., diabetes, OVE	:R	

## Parental Permission to Participate in Host Family Program

The Host Family Program is offered to academy students as a means of providing support outside the school community for students. Families who participate in this program provide a home away from home for academy students. Families may provide home-cooked meals, transportation, shopping, religious activities, or overnight stays as well as helping students adjust to living away from home for the first time. There may not be a host family for all students that make a request. You will be notified if your student cannot be placed with a host family.

,parent/guardian	, do hereby consent	t for my child or ward to participate
in the Texas Academy of 2015-2016 school year. program is not mandate school for reasons state risk and that the unive	ory, nor based on enrollment ed above. I understand that n	in of my child, understand that this at the school and is offered by the ny child participates at his/her own host family assigned to my child
Parent or Gua	rdian Signature	Date
Print Parent or	Guardian's Name	

Please turn this form in to our office at Sage 202 or mail it to:

TAMS Student Life Office 1155 Union Circle #305309 Denton, Texas 76203-5017

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Revised 5/15