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**American Intercultural  
Student Exchange**  
A non-profit tax exempt educational Foundation

Office of the  
President

## HIGH SCHOOL CONSENT FOR DOUBLE PLACEMENT

This is to certify that \_\_\_\_\_  
Last Name First Name

born on \_\_\_\_/\_\_\_\_/\_\_\_\_ from \_\_\_\_\_,  
Name of Foreign Country

and \_\_\_\_\_,  
Last Name First Name

born on \_\_\_\_/\_\_\_\_/\_\_\_\_ from \_\_\_\_\_,  
Name of Foreign Country

will be attending \_\_\_\_\_  
Name of High School

\_\_\_\_\_  
Address

\_\_\_\_\_ City State Zip Code

\_\_\_\_\_ Phone

It is further understood by this school administration that these two students will be residing at the residence of:

\_\_\_\_\_ Host Family Name

\_\_\_\_\_ Address

\_\_\_\_\_ City State Zip Code

\_\_\_\_\_ Phone

for the school year of \_\_\_\_/\_\_\_\_.

\_\_\_\_\_  
Principal of High School or Designated  
Person Authorized to Enroll Foreign Students.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_