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Office of the
President

American Intercultural Student Exchange

A non-profit tax exempt educational Foundation

CHANGE OF HOST FAMILY FORM

Student's Name _____
Last First

Birthdate ____/____/____ COUNTRY _____

FORMER HOST FAMILY

Name _____
Last First

Address _____
Street

City State (Write in Full) Zip

Home Telephone ____/____ Business Telephone ____/____

Name of School _____

School Address _____

School Telephone ____/____

Former Airport _____ Airport Code _____

Area Representative _____ Telephone ____/____

NEW HOST FAMILY

Name _____
Last First

Address _____
Street

City State (Write in full) Zip

Home Telephone ____/____ Business Telephone ____/____

Husband's Occupation (Title) _____ Wife's Occupation (Title) _____

Children in the family _____
Boy(s) Ages Girl(s) Ages

Name of School _____

School Address _____

School Telephone ____/____

New Airport _____ Airport Code _____

Area Representative _____ State: _____ Telephone ____/____

Date of change ____/____/____ Reason for change: _____