This information is for official use only Protect IAW AFI 33-332 and DoD Regulation 5400.11 And the Privacy Act of 1995

Completion of this form, or any portion of it, it voluntary

PLEASE RETURN TO: Insert BASP email, POC name and phone number

HOST FAMILY QUESTIONNAIRE

	E: (Title, Las	st, First, MI)						
(Work) HOME E-MAIL:			(Home)), <u>(</u>) EMAIL:		(Cell) and (
members. ETHINICITY: (Ci		-American e-American	-		asian No An		/Pacific Islander Other:	
Non-			heist Bapti amic/Muslii	ic/Muslim Denominational		ist tant	Catholic Methodist	
YOUR INTERESTS (Circle) Aviation Computer/Video Games Horse Baseball Cooking/Baking Basketball Fishing/Hunting Bikes Football Golf Tennis			Musi Racq	Musical Instrum Racquetball Swimming				
PREFERENCES: Rate your preferences by number, so we can appropriately match you to a host family (1 is at least important and 5 is most important)								
	ous Affiliatio	n 1			4	5 5 5		
Do you have any of the following in your home? (Circle) Cats Dogs Other Pets Smokers Children (age						eference		
Do you have access to base? Y/N How did you hear about the program? Preferred Method of Communication: Do you text? Y/N								
Additional Com	iments/desi	res:						
Airman Special Request Name: Unit:								