2019 Appeal for Host Families

Program Background: The Center for the Study of Canada, SUNY Plattsburgh, with support for the Bureau of Educational and Cultural Affairs, The United States Department of State, The United States Embassy Ottawa, World Learning and Fulbright Canada will be welcoming a group of students aged 15-18 and two adult mentors to the Plattsburgh area. The purpose of the program is for participants to be immersed in the Plattsburgh community and to get a taste of American culture, but also to develop a community service project. Throughout the program, the participants will gain the skills and tools needed to complete a their project in their home community.

Who are the participants?: The group of Youth Ambassadors from Canada will represent the geographic, ethnic and socioeconomic diversity of Canada. Preferred candidates have not previously visited the United States, are new Canadians, and/or Indigenous Canadians. Youth participants are aged 15 to 18 years old; and adult mentor participants are older than 27 years old.

About Hosting:

Hosts are needed for the period of **July 17 to 28, 2019.** Participants will require lodging with hosts for 11 nights. Hosts should be available to spend time with participants in the mornings and evenings. Participants will be in sessions at SUNY Plattsburgh for a majority of the days they are in Plattsburgh. There will also be two weekend days when hosts should be available to spend the entirety of the day with their participants to enjoy some free time and local activities together.

Why host?

Hosting provides the opportunity for mutual understanding, cross-cultural exchange, and to meet outstanding Canadian youth and adult mentors who want to change the world.
What do hosts need to provide for participants?:
- Space for participant(s) to sleep in their own bed, in a single or shared room with someone of similar gender and age.
- Meals when they are in your home (most breakfasts and dinners).
- Transportation to and from SUNY Plattsburgh each day they have sessions.
- Activity options for participant(s)-host(s) to do together during free time.

What do I need to do to apply?
- Submit your application
- Submit your references sheet
- Complete a criminal background check
- Hosts of youth participants are also required to undertake child protection training

What if I have more questions or would like to apply?

Contact:
Hillary Sponable, Home Stay Coordinator
Center for the Study of Canada, SUNY Plattsburgh
133 Court St, Plattsburgh, NY 12901
Tel: 518-570-9565 Email: hspon001@plattsburgh.edu

“I absolutely loved staying with my host. She made me feel very welcome and I had the best experience imaginable.” -2018 Youth Ambassador
(Please print)

Mr/Mrs/Ms: ____________________________________ Birthday:____/_____/____           ___Married ____Single
Circle One        First Name      Middle Name    Last Name

Host Occupation:______________________________  Employer__________________________________________

Mr/Mrs/Ms: ______________________________________ Birthday:____/_____/____          ___Married ____Single
Circle One        First Name      Middle Name    Last Name

Host Occupation:_______________________________  Employer__________________________________________

Home Address:______________________________________________________________________________________

                                                                                                                Street
                                                                                                                City                                               State                       Zip Code

Telephone Numbers:
Home Phone:_________________________________________________________________________________
Cell Phone:__________________________________________________________________________________

Work Phone:__________________________________________________________________________________

Email Addresses:
___________________________________________________________________________________________________

Other people in the household:
Name______________________________ Birthdate________________Relationship_______________________________
Name______________________________Birthdate________________ Relationship_______________________________

Return application to:  Hillary Sponable, Home Stay Coordinator      Phone: 518-570-9565
Center for the Study of Canada                          Fax: 518-564-2112
SUNY Plattsburgh, 133 Court Street        Email: hspon001@plattsburgh.edu
Plattsburgh, NY 12901
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July 17-28, 2019
Personal References
I, ____________________________, understand that I am agreeing to become a host for the Youth Ambassadors Program with Canada. I agree to follow the homestay guidelines and policies set forth by the program. I agree to provide a furnished room, food for breakfast and some family style dinners. (Please note: while guest(s) may share a room with someone of similar age and the same gender, they must have their own bed.)

I agree to submit to a criminal background check.

I agree to provide transportation for my guest(s) to SUNY Plattsburgh each morning and to return to my home every evening as needed. I agree to engage the host student(s)/adults in conversations and provide answers to questions and support as needed. When I do not know the answers or more support is needed, I agree to contact the Home Stay Coordinator for assistance.

I understand that I am not obligated to keep any guest in my home who is engaging in illegal activities that I deem harmful and will contact the Home Stay Coordinator immediately and request the guest be removed as soon as possible.

The Youth Ambassadors Program with Canada reserves the right to use its own discretion when selecting prospective host families. Applications that contain erroneous or false information are subject to annulment. The Youth Ambassadors Program with Canada and agents will be held harmless from and against all claims, damages, actions liability, and expense concerning loss of life, or personal property arising from hosting a student or adult participating in its program.

Host Family (print name): ___________________________________________ Date: __________

Signature: _____________________________________________________________

Other adult resident (print name): _______________________________________ Date: __________

Signature: _____________________________________________________________

Other adult resident (print name): _______________________________________

Signature: _____________________________________________________________

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