



Fill out **only** if you want PAA to find a host family for you.

P O R T L A N D A D V E N T I S T A C A D E M Y

STUDENT PLACEMENT SURVEY

We attempt to match host families to student interests and characteristics. To help us locate the best family for you please answer the following questions honestly:

Student History:

How many children are in your family (not including yourself)? _____

Name: _____ Lives at home: Yes No Age _____ M F Birthdate: ___/___/___

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Name: _____ Lives at home: Yes No Age _____ M F Birthdate: ___/___/___

Please list any other persons living in your home:

Name: _____ Relationship: _____ Age _____ M F Birthdate: ___/___/___

Name: _____ Relationship: _____ Age _____ M F Birthdate: ___/___/___

Do you have friends or relatives living in the U.S.? _____ Where? _____

You may be required to share a room with a host family child of the same sex.

Do you share a bedroom at your home? Yes No With whom? _____

Would you be comfortable sharing a bedroom with a host child? Yes No No preference

Do you like young children? Yes No No preference

Host child age group preferred: infant-5years 5-8years 8-12years 12-15years 15+years

Would you be comfortable in a family with no children? Yes No No preference

Do Grandparents live in your home? Yes No Grandmother's Age: _____ Grandfather's Age: _____

Would you be comfortable with an older couple as host parents? Yes No No preference

Would you be comfortable if an older couple shared the host home? Yes No No preference

What are your favorite foods? _____

If there are foods you don't like, what are they? _____

Do you drink alcohol in your home country with meals? Yes No No preference

Would you be comfortable in a host home where there is alcohol? Yes No No preference

Do you smoke? Yes No

Would you be comfortable in a host home where there is smoking? Yes No No preference

Do you have any health concerns?

If you own a pet, what kind/s? _____

Would you be comfortable in a host home that has a pet/s? Yes No No preference

If possible, I would prefer to live in: The city Suburbs The country



English Background / Ability:

*Questions for those planning to attend school in the United States:

If you have traveled outside your home country, where, when & why? _____

If a second language is spoken in your home, by whom & which language? _____

How many years have you studied English? _____

How many hours per week do you now spend in English classes? _____

What books have you read in English lately? _____

Please rank your English ability: 1 Low 2 3 4 5 Advanced _____

What do you consider your strongest subjects? _____

What do you consider your weakest subjects? _____

How long do you plan to study in the U.S.? _____

Do you want to go to college? Yes No If so, where? U.S. Native country Other _____

Please explain why you want to go to school in the United States: _____

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RELIGIOUS PREFERENCES:

My religion is: Buddhist Shinto Christian Hindu Jewish Other _____

Religious participation in my home country: regularly occasionally rarely never

YOUR PERSONALITY: check all that apply to you

- | | | | |
|---------------------------------------|--|--------------------------------------|--|
| <input type="checkbox"/> Brave | <input type="checkbox"/> Cautious | <input type="checkbox"/> Cooperative | <input type="checkbox"/> Uncooperative |
| <input type="checkbox"/> Positive | <input type="checkbox"/> Negative | <input type="checkbox"/> Serious | <input type="checkbox"/> Humorous |
| <input type="checkbox"/> Hard Working | <input type="checkbox"/> Casual | <input type="checkbox"/> Friendly | <input type="checkbox"/> Shy |
| <input type="checkbox"/> Happy | <input type="checkbox"/> Unhappy | <input type="checkbox"/> Neat & tidy | <input type="checkbox"/> Messy |
| <input type="checkbox"/> Solemn | <input type="checkbox"/> Cheerful | <input type="checkbox"/> Aggressive | <input type="checkbox"/> Respectful |
| <input type="checkbox"/> Independent | <input type="checkbox"/> Dependent | <input type="checkbox"/> Outgoing | <input type="checkbox"/> Reserved |
| <input type="checkbox"/> Bold | <input type="checkbox"/> Hesitant | <input type="checkbox"/> Assertive | <input type="checkbox"/> Passive |
| <input type="checkbox"/> Affectionate | <input type="checkbox"/> Reserved | <input type="checkbox"/> Adventurous | <input type="checkbox"/> Fearful |
| <input type="checkbox"/> Judgmental | <input type="checkbox"/> Understanding | <input type="checkbox"/> Forgiving | <input type="checkbox"/> Vengeful |
| <input type="checkbox"/> Intellectual | <input type="checkbox"/> Creative | <input type="checkbox"/> Harsh | <input type="checkbox"/> Sensitive |
| <input type="checkbox"/> Modest | <input type="checkbox"/> Flashy | <input type="checkbox"/> Consistent | <input type="checkbox"/> Undependable |



- Trustworthy
 Irresponsible
 Considerate
 Selfish

What characteristics/qualities do you value most in other people? _____

ARTS AND ENTERTAINMENT: check all that apply to you

- Dancing (ballet, other)
 Drama, theater
 Flower arrangement
 Reading
 Listening to classical music
 Painting, drawing
 Photography
 Playing indoor games
 Listening to popular music
 Singing
 Visiting museums
 Watching sports
 Watching movies
 Watching T.V.
 I play _____ (musical instrument)

HOBBIES AND OTHER INTERESTS: check all that apply to you

- Chess
 Computers
 Gardening
 Handicrafts
 Knitting
 Sewing
 Cooking
 Traveling
 Stamp collecting

Other _____

What are your favorite hobbies and/or interests? _____

SPORTS: check all that apply to you

- Archery
 Badminton
 Baseball
 Basketball
 Bicycling
 Camping
 Fishing
 Gymnastics
 Hiking
 Horseback riding
 Hunting
 Ice Skating
 Judo
 Karate
 Kendo
 Roller Blading
 Snow skiing
 Soccer
 Swimming
 Table Tennis
 Tennis
 Track
 Volleyball
 Water skiing
 Wind surfing
 Other _____

What are your favorite sports? _____

FREE TIME PREFERENCES:

I spend my free time _____

During weekends in the United States I would prefer: check all that apply to you

- Activities with my host family
 Making new friends
 Playing with host children
 Sightseeing
 Watching T.V./Movies
 Shopping with my friends
 Relaxing

Other _____



PRIORITIES:

Please choose the most important factors in choosing a host family for you. Rank them from 1 to 10

(1=most important ... 10=least important):

- Own room Close to school Nice home Feel part of family Quiet family
 Children No children Pets Active family Outgoing family



Parent Statement

Please share the following information with the host parents who will open their home to your son or daughter during the coming year:

- Describe your child's relationships with family members and friends.

- Describe your child's study and personal habits.

- Describe your child's career and academic aspirations.



- Describe your child's educational life during the past two years.

- Describe the ideal kind of host home environment you desire for your child.

Signature of Parent: _____ Date: _____