



AFS-USA Liaison Information Request Form

The information requested on this form may be submitted separately from the host family application

Liaison Information may be submitted in the following ways:

- Email to hostfampapers@afs.org (please include all information requested below)
- Submit on AFS Online (detailed directions below)
- By faxing this form to 503-961-8388
- By mailing this form to AFS Admissions Center, 506 SW 6th Avenue, 2nd Fl, Portland, OR 97204

Liaison Information

The following person has been assigned as an AFS Student/Family Liaison:

	<input type="checkbox"/> Check box if the Liaison has NOT completed the AFS-USA Volunteer Registration Process
Name	
Address	
Email (required)	
Home phone	Other phone (please specify)

Student and Family Information

Student's Full Name and Country	
Host Family Name	
Local AFS Representative Name (Your Name)	Your Email

Directions for entering Liaison Information on AFS Online

- Go to www.afsonline.org and enter your user ID and password.
- Select "Support" on the homepage image menu.
- Click on the name of the student you want to assign the liaison to.
- In the Liaison Information section, click on "Submit New Liaison".
- To select a liaison that is already listed in the AFS database as a current volunteer:
 - ∞ Click on the link to "select from current volunteers".
 - ∞ Select the new liaison and click "OK". The new liaison's name will be added to the field.
 - ∞ When finished, click "Submit".
- To add a new volunteer that is not already in the AFS database, follow the below instructions
 - ∞ Select the 'Check Here if New Volunteer' box.
 - ∞ In the new form, fill in the information for the new liaison.
 - ∞ When finished, click 'Submit'.

AFS Student/Family Liaison Job Description

- ∞ Complete AFS Volunteer Registration Process.
- ∞ Make separate contact (by phone, group activity, or personal visit) with the student and host family on a monthly basis to inquire how things are going.
- ∞ Document the monthly contact via AFS Online or via the phone-in system.
- ∞ Act as an objective listener, identify potential problems, and provide problem solving assistance if the need arises.
- ∞ Inform the Local Coordinator or Area Team (AT) Support Coordinator of any questions or situations which require the AT Support Coordinator's or staff's involvement.



AFS-USA Liaison Monthly Contact Form

AFS Participant:			
Country of Origin:		Area Team:	

According to State Department regulations and CSIET standards, separate contact with each participant and host family is required on a **monthly** basis and must be documented. Contact with schools is not required monthly but rather periodically throughout the year.

Contact made with the Participant:		Contact made by:	
	<i>date</i>		<i>person</i>

Method of Contact (check one)	<input type="checkbox"/> Phone	<input type="checkbox"/> Personal Visit	<input type="checkbox"/> Group Activity	<input type="checkbox"/> Other
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Contact made with the Host Family:		Contact made by:	
	<i>date</i>		<i>person</i>

Person Contacted:			
	<i>person</i>		

Method of Contact (check one)	<input type="checkbox"/> Phone	<input type="checkbox"/> Personal Visit	<input type="checkbox"/> Group Activity	<input type="checkbox"/> Other
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Contact made with the School:		Contact made by:	
	<i>date</i>		<i>person</i>

Person Contacted:			
	<i>person</i>		

Method of Contact (check one)	<input type="checkbox"/> Phone	<input type="checkbox"/> Personal Visit	<input type="checkbox"/> Group Activity	<input type="checkbox"/> Other
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After making contact, please reflect **your interviewee's** opinion of the participant's adjustment progress in the following scale (use separate form for each person interviewed)

*Please include a comment when giving a rating of "Poor" or "Needs Improvement."

	*1 Poor	*2 Needs Improvement	3-Satisfactory	4-Very Good	5 Excellent
Relationship between host family and Participant	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Participant is abiding by the family rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Participant's participation in school/community activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Participant's performance in school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Participant's overall rating in language conversation ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Participant's participation in AFS activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					
Appropriate communication with natural family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

Please include your individual comments about the participant's adjustment process below and on the back. All "Poor" and "Needs Improvement" scores must include comments.

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