

# Program Evaluation for Host Families



Association for Teen-Age  
Diplomats

In an effort to continue to improve our services to the community and to international understanding, we are requesting your candid evaluation of the ATAD Exchange Student Program and your experiences as a Host Family. Please take a few moments to complete the following questionnaire and return it to the address below. Thank you for your input.

Please return to: Suzanne Isgrigg  
37 Tobey Court  
Pittsford, NY 14534  
Email (preferred): Froggymom@aol.com

Name (optional): \_\_\_\_\_ Phone number (optional): \_\_\_\_\_

We hosted a student for: 4+4 \_\_\_ Summer \_\_\_ Semester \_\_\_ Year \_\_\_

The preparation we received to become a host family (including orientations, one-on-one contact, materials received, etc.) was:

	excellent	good	fair	poor
before student arrived				
after student arrived				
before student returned home				

How would you rate the ATAD staff:

	excellent	good	fair	poor
professional				
knowledgeable				
helpful				

Did you have a personal interview before being accepted as a Host Family: yes \_\_\_ no \_\_\_

What level of contact did you have with program representatives while your International Student was here: once/week \_\_\_ every 2 weeks \_\_\_ once/month \_\_\_ every 2 months \_\_\_ less than every 2 months \_\_\_

How was the contact by program representatives made (check all that apply):

telephone \_\_\_ personal visit \_\_\_ activity \_\_\_ school \_\_\_ letter \_\_\_  
other (please explain) \_\_\_

How would you rate the ATAD sponsored activities, including trips:

	excellent	good	fair	poor
information received				
activities				
staff				
overall quality / support				

Did ATAD use appropriate criteria in matching your family with the student? yes \_\_\_ no \_\_\_

Do you feel you received adequate information about the added costs an exchange student would bring to your household? yes \_\_\_\_\_ no \_\_\_\_\_

Were any insurance needs handled in an acceptable manner? yes \_\_\_\_\_ no \_\_\_\_\_

If no, please explain:

If you had any problems or concerns with your International Student (e.g. school, language, adjustment, interactions with family or siblings, emergency situation, etc.), please complete the following:

Briefly describe the problem (optional):

Did the ATAD Program Chair help you with the problem: yes \_\_\_\_\_ no \_\_\_\_\_

How would you rate the assistance: excellent \_\_\_\_\_ good \_\_\_\_\_ fair \_\_\_\_\_ poor \_\_\_\_\_

How would you rate the overall quality of the ATAD exchange program: excellent \_\_\_\_\_ good \_\_\_\_\_ fair \_\_\_\_\_ poor (please explain) \_\_\_\_\_

Why did you choose ATAD:

If you were to host another student, how likely would you be to host one from ATAD?  
very likely \_\_\_\_\_ likely \_\_\_\_\_ unlikely \_\_\_\_\_ very unlikely \_\_\_\_\_

The part of the program/organization which I most liked was:

One way in which ATAD could improve is:

Additional comments:

The following families would like to receive information about hosting an International Student:

_____	_____	_____
Name	Address	Telephone Number
_____	_____	_____
Name	Address	Telephone Number
_____	_____	_____
Name	Address	Telephone Number