

5. Are there additional International Student concerns (e.g. problems in the natural family, unrealistic expectations, medical, language, etc.)?

6. Are there any school issues (e.g. grades, motivation, frequent absences, social activities, etc.)?

7. Are there other involved persons (e.g. neighbor, friends, police, etc.)? If yes, please indicate name and relationship of all others involved. If their perspective is obtained, please attach an additional sheet of paper with a summary.

8. What have the International Student/Host Family already done to solve the problem?

Plan of Action

Action	Responsible Party	Deadline/Timeline
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

International Student Signature _____ Date _____

Host Family Signature _____ Date _____

Host Family Signature _____ Date _____

Host Family Signature _____ Date _____

Host Family Signature _____ Date _____

Program Chair Signature _____ Date _____

Additional ATAD Board Member _____ Date _____