Greetings from Michigan 4-H Youth Development!

Thank you for your interest in the Michigan 4-H International Exchange - Japan Summer Inbound Program! Caring, competent host families who are willing to open their hearts and homes to a visitor from Japan are the most important part of the program. Hosting can have a profoundly positive impact on your family, on our visitors from Japan, and on our world!

The Japanese delegates will arrive in Michigan on July 23, 2016. Upon arrival, they will participate in an overnight orientation program before being placed with their host families on July 24. The delegates will live with their host family until August 20, 2016. After an overnight debriefing program, they return to Japan on August 21.

Delegates are placed on a first come basis to families that have successfully completed the application process. Host families are asked to submit their application by May 1, 2016. This packet contains instructions and forms needed to apply to become a host family.

Before completing an application, please ensure that your family can meet the following basic hosting requirements:

To host a youth delegate, you must have a child of the same gender and approximate age (9-18 years old) as the delegates (12-16 years old). The primary host sibling has the main responsibility for keeping the delegate company.

To host a youth delegate, families must host for the entire exchange period (July 24-August 20, 2016). The youth delegate requires a separate bed in a bedroom with same gender sibling/s or a private bedroom.

To host an adult chaperone, there is no sibling requirement. Individuals or any type of family may host for two weeks (July 24-August 7 and/or August 7 - August 20) or for all four weeks. Adult chaperones require a private bedroom.

After we receive your application and complete your background and reference checks, you will be contacted by a 4-H staff member to schedule an in-home interview with your family. Following the completion of a successful application and in-home interview, we will work with your family to select a delegate. Once you are matched, you may send letters or email to get to know your Japanese delegate.

Thank you for your interest in being a 2016 host family! Please feel free to contact me with any questions you have about the program. We look forward to supporting your family’s participation in this year’s exchange program!

With Appreciation,  
D'Ann Rohrer

D’Ann Rohrer - MSU Extension Educator, Leadership and Civic Engagement  
MSU Extension, 111 South Main Street, Scottville, MI 49454  
Office: 231-757-4789  Cell: 231-233-7603  drohrer@anr.msu.edu
Frequently Asked Questions (FAQ)

Who can be a host or host family to a Japanese delegate? Families of all types of backgrounds*, anywhere in Michigan, are welcomed and encouraged to host.

What about summer camp? Japanese delegates can attend day camps with their primary host sibling. We can reimburse for camps for up to $200/week. For questions about over-nights or more expensive camps please contact us. Participation in church or temple affiliated camps are acceptable with the understanding that it is for the social experience with the host sibling and peers.

Do the delegates have insurance? Yes, the delegates all have medical insurance. If any accident or illness occurs, please contact us directly, and bring your student to an urgent care walk-in clinic along with their insurance card and your authorization paper.

What is my financial obligation? Host families are asked to provide room and board (3 meals a day). The delegates will bring their own spending money.

What is my time obligation? Include the delegates in all family activities during their stay. Transport the delegate to and from the pick-up and drop-off site. Read materials emailed by the exchange coordinators. An optional mid-term picnic will be offered in locations with multiple delegates.

What is the obligation of the primary host sibling? The host sibling of the delegate must keep the exchange uppermost in mind during the hosting month, and make sure the delegate feels comfortable around friends and is included in activities.

How much English do the delegates speak? Most of the youth will have limited English communication skills. Be flexible, patient, and willing to communicate both verbally and non-verbally with your delegate. They will understand more than they speak, and will improve over the month. Adult chaperones have strong English skills.

How do we prepare to be a host family? Host families will participate in an online one hour orientation. During this orientation you can ask questions of veteran host families. You will also receive by mail a host family guidebook, a handbook of basic Japanese language, and a Japanese language CD. You can also ask questions about hosting during your in-home interview with 4H staff.

What do host families do? Host families welcome the delegate into their home and treat him or her like one of the family. The delegates join in everyday activities, help with chores, and otherwise fit in as a brother or sister. No special activities need to be planned, although many families and visitors enjoy occasional sightseeing trips to local attractions and landmarks. Host families appreciate the chance to develop friendships that reach around the world.

Can my child go to Japan? Your child can make a reciprocal exchange trip to Japan through Michigan 4H and LABO. Host families are credited $100 per month of LABO hosting toward the cost of their child’s trip. Hosting a summer delegates earns $100 credit; hosting an academic year high school delegate earns $1000.

*MICHIGAN STATE UNIVERSITY Extension

Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran status.
Step-By-Step Application Instructions

1. Complete a Host Family Application: (If you don’t have online access, Heather can mail you a paper application.)
   To begin your application go to www.states4exchange.org/host-families/

   Create a new account (or sign into an existing account) by entering your email address and a password. (You will be able to save your application and return to it later to make changes or add information)

   On page 2 of the application, you will enter contact information for two family references. The host family reference forms must be completed by individuals who are NOT related to your family by blood or marriage. You can download the reference forms from the website and email forms to your references to complete or you can provide printed copies of the form (included with this packet) to your references.

   Completed reference forms must be emailed, mailed, or faxed to Heather Gray by the person completing the reference for your family.

   These references can also be completed via phone interview. If your references would prefer this option, please let Heather know so that she can arrange brief phone interviews with them.

   On page 4 of the online application, you can upload a picture of your family. If you don’t have a digital photo of your family, or if you’re unable to upload a photo to the website, send or email a photo to Heather to add to your application materials.

   On page 8 of the application, you will review all the information you have entered for accuracy, and you may edit your application information at this time. Once you are satisfied with your application, scroll to the bottom and click “Submit My Application”.

   For each person who will be living in your home during the exchange, who is, or will be, over the age of 18:

   Complete a “MSU Extension Criminal History Check Permission Form”

   A separate form for each person aged 18 or older who will have ongoing or unsupervised access to a Japanese delegate during their visit must be completed.

   “Ongoing” is defined as more than four meetings or gathering times or in-depth contact (such as overnight events). “Unsupervised” would mean that the person is alone with a delegate for significant periods of time (15 minutes or more). At a minimum, a form for each adult living in the host family home must be completed.

   Submit completed Criminal History Check Permission Form(s) to Heather Gray by mail, fax, or email.

   Complete a “Central Registry Clearance Request” form (required for each person aged 18+ at time of exchange)

   Michigan’s Central Registry is a list of people who have committed child abuse or neglect. The Michigan Department of Human Services (DHS) will check the registry based on the information you provide on the clearance request form and notify the State 4-H office if there is NOT a record of an individual in the registry. If an individual is listed in the Central Registry, the results will not be sent to the State 4-H office, but will be mailed to you.

   Fill out all the fields in Section 1 of the Central Registry Clearance request form included in this packet.

   Make a copy of your photo identification (driver’s license), (can be made on a separate piece of paper)

   Fax, mail, or drop-off the completed form and the copy of your photo ID to the DHS office in the county in which you are a resident.

   A directory of county office addresses and fax numbers is available at:

   If you have questions or need assistance completing or submitting any of the forms, please contact Heather Gray:

   Heather R. Gray - 4-H International Program Coordinator
   MSU Extension Children and Youth Institute
   Justin S. Morrill Hall of Agriculture, 446 W. Circle Drive; Room 160 Annex, East Lansing, MI, 48824

   phone - 517.355.2361 mobile 517-755-8101 fax - 517.355.6748 grayhea2@anr.msu.edu
This family has applied to host a participant in a States’ 4-H International Exchange Program. A host family represents the U.S. culture to the visitor and plays a very important role in determining the success of the participants’ experience in the United States. The information that you give us will be useful in determining the placement of individual participants. Please answer all questions as fully as possible.

Thank you for providing this reference. All information is confidential to the extent allowable by law and will only be used to select host families.

Name of Host Family: __________________________________________

Address: ____________________________________________________

City: __________________ State: __________ Zip: __________

Telephone: Home __________________ Cell __________________

Name of person completing this form: ____________________________

Address: ____________________________________________________

City: __________________ State: __________ Zip: __________

Telephone: Home __________________ Cell __________________

How long have you known this family? From ________________ To ________________

How often do you see the family? ____________________________

What is your relationship with this family? ____________________________

What special interests (camping, horses, photography, art, cooking, sewing, sport, etc.) do family members have, especially the teenager(s)?

___________________________________________________________________

How do you feel this family will adjust to unexpected situations, different customs, etc.? ____________________________

___________________________________________________________________

How do you feel that this family will welcome a visitor of a different religion and different ethnic background? ____________________________

___________________________________________________________________

What are this family’s greatest strengths? ____________________________

___________________________________________________________________

What are this family’s weaknesses? ____________________________

___________________________________________________________________

Are you aware of any drug, alcohol, or child abuse on the part of any member of the family?

☐ YES ☐ NO If yes, please explain: ____________________________

___________________________________________________________________

In your opinion, would a young visitor find this family supportive and understanding of difficulties in adjusting to strange customs, new foods, interpersonal relationships, etc.? Please give an overall assessment. If you have a son or daughter age 12-18, would you feel comfortable if your child were placed with this family? ____________________________

___________________________________________________________________

Would you recommend this family to host a participant? ☐ Very Strongly ☐ Yes

☐ With some hesitation ☐ No

Signature ____________________________ Date __________
MSU Extension Criminal History Check Permission Form

Last Name __________________________ First Name __________________________ Middle Initial __________________________

Race ______ White ______ Black ______ Asian or Pacific Islander ______ American Indian or Alaskan Native ______ Unknown/Other

Sex ______ Male ______ Female ______ Date of Birth ______ Month ______ Date ______ Year

Michigan Driver License Number __________________________________________

Please list any other names or aliases that you have been known by:

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<th>Other Last Name</th>
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Have you ever been convicted of a felony or a misdemeanor? ______ No ______ Yes

If yes, please explain: __________________________________________

__________________________________________________________________

I give Michigan State University Extension permission to check my criminal history with state and local police as well as with any jurisdictions in other states in which I have lived.

Signature __________________________________________ Date ____________

NOTE: A criminal record will not necessarily disqualify an applicant. A criminal record is one piece of information that will be considered in determining the appropriateness of an individual to be an MSU Extension volunteer.

MSU is an affirmative-action, equal-opportunity employer. Michigan State University Extension programs and materials are open to all without regard to race, color, national origin, gender, gender identity, religion, age, height, weight, disability, political beliefs, sexual orientation, marital status, family status or veteran status.
CENTRAL REGISTRY CLEARANCE REQUEST  
Michigan Department of Human Services

INSTRUCTIONS:
- An enlarged and clear copy of individual’s photo identification must be attached.
- For Michigan employers, individuals and volunteer agencies, submit this request to the local County Department of Human Services. To obtain the address and fax number of your local county DHS, access www.michigan.gov/dhs>Inside DHS.
- For individuals seeking clearance on themselves, the results will be sent to the address on the picture identification provided.
- Outstate Children’s Protective Services workers, law-enforcement, and court officials fax request to 517-241-7047 (Outstate only) on agency letterhead with cover sheet.
- All fields must be completed for processing.

SECTION 1  
INFORMATION ON PERSON BEING CLEARED

<table>
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<tr>
<th>Name First, Middle, Last</th>
<th>AKA (Also Known As) (Maiden Name)</th>
<th>Social Security Number</th>
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SECTION 2  
REQUESTOR INFORMATION

Please Check Appropriate Box
- [ ] Child Welfare Agency  
- [ ] Individual  
- [ ] I would like to pick up my results in  
- [ ] Law-Enforcement/Dept of Corrections  
- [ ] Prosecuting Attorney/Court (please provide docket number if available)  
- [ ] Employer  
- [ ] Volunteer Agency  
- [ ] Out-of-State Adoption and Foster Home Screening  
- [ ] Other

Name of Employer/Volunteer Agency/Individual  
Michigan State University Extension - 4-H International

Name  
Heather Gray

Title  
4-H International Program Coordinator

Address  
Justin S. Morrill Hall of Ag., 446 W. Circle Drive; Room 160 Annex

City  
East Lansing

State  
MI  
Zip Code  
48824

Phone  
517-355-2361

Fax  
517-355-6748

E-mail  
grayhea2@anr.msu.edu

Date  
2-26-16

Employers/volunteer agencies – will ONLY receive responses of NO central registry if the name submitted has approved this request with their signature. Employers/volunteer agencies will NOT receive notification if the name submitted has any central registry history hits per CPL 722.627.

For questions about completing this form, please contact the local Michigan Department of Human Services, Children’s Protective Services or CPS Program office at 517-373-6028. Mail questions to PO Box 30037, 235 S. Grand Avenue, Suite 510, Lansing, Michigan 48809

This clearance does not identify individuals who may have child abuse/neglect history in other states, territories or tribal trust land.

The confidentiality of central registry information is protected by Seotions 7 through 7 of the Michigan Child Protection Law (MCL 722.627-722.627). Anyone who violates this protection is guilty of a misdemeanor and is civilly liable for damages.

Department of Human Services (DHS) will not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, sex, sexual orientation, gender identity or expression, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.