



CURRICULUM AND PROFESSIONAL DEVELOPMENT DIVISION

K-12 Science, Health and Foreign Language

3950 S Pecos McLeod, Suite 2D

Las Vegas, NV 89121

(702) 799-8404 Office

(702) 855-9773 Fax

Single-Parent Host Family Acknowledgement

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Foreign Exchange Program: \_\_\_\_\_

Program Representative: \_\_\_\_\_

Clark County School District (CCSD) procedures for the acceptance of foreign exchange students require that foreign exchange organizations notify the parents of any foreign exchange student that will be placed in the home of a single host parent. This form must be submitted either with the original foreign exchange student application or a student placement change form before authorization will be given for the student to enroll in CCSD schools.

Natural Parent(s): \_\_\_\_\_

Home Country Address: \_\_\_\_\_

This certifies that the above named foreign exchange student's parents have been notified of the organization's intent to place the student in the home of a single host parent. The student's parents have given authorization for this placement.

Date of parent notification: \_\_\_\_\_

Method of notification: \_\_\_ Phone Call \_\_\_ Letter \_\_\_ Fax \_\_\_ Other \_\_\_\_\_

Representative's Signature \_\_\_\_\_

Date \_\_\_\_\_