



## FOREIGN STUDENT EXCHANGE AGENCY ASSURANCE FORM

Foreign exchange agency will comply with the following requirements for participation with Uintah School District for the 2013-2014 school year:

1. \_\_\_\_\_ Foreign exchange agency has complied with all applicable policies of Uintah School District Board of Education regarding foreign students (see policy 007.0125 Foreign Students).
2. \_\_\_\_\_ Foreign exchange agency conducted a household study, including a background check of ALL adult residents, of each household where an exchange student is to reside, and that the study was of sufficient scope to provide reasonable assurance that the exchange student will receive proper care and supervision in a safe environment.
3. \_\_\_\_\_ The foreign exchange host parents have received training appropriate to their positions, including information about enhanced criminal penalties, under Utah Code subsection 76-5-406(10), for persons who are in a position of special trust.
4. \_\_\_\_\_ A representative of the foreign exchange agency shall visit with each student's place of residence at least once each month during the student's stay in Utah.
5. \_\_\_\_\_ Foreign exchange agency will cooperate with school and other public authorities to ensure that no exchange student becomes an unreasonable burden upon the public schools or other public agencies.
6. \_\_\_\_\_ Each exchange student will be given in the exchange student's native language names and telephone numbers of foreign exchange agencies' representatives and others who could be called at any time should a serious problem occur.
7. \_\_\_\_\_ Foreign exchange agency has alternate placements readily available so that no student is required to remain in a household if conditions appear to exist which endanger the student's welfare.

My signature as the local foreign exchange agency representative, verifies that the agency will comply with the requirements listed above.

Foreign Exchange Agency Name \_\_\_\_\_

Agency Address \_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_  
Agency Representative  
(Print Name)

\_\_\_\_\_  
Agency Representative  
(Signature)

\_\_\_\_\_  
Date

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On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_  
personally appeared before me, to be the signer of the above document, and he/she acknowledged that he/she executed the same.

\_\_\_\_\_  
Notary Public for the State of Utah, County of Uintah