

Planting Hope - *Sembrando Esperanzas*
Long-Term Volunteer Registration Form
& Home Stay Questionnaire



Dates of Volunteer Stay: _____

Participant's Full Name: _____

School: _____ Grade/College Year: _____

Email Address: _____ Date of Birth: _____

Work # _____ Cell # _____ Home Phone _____

Home Address _____
Address City State Zip Code

Parent/Guardian Name & Email & Phone # _____

(If applicable)

Home-Stay, Travel, Language

Do you know any Spanish?

How much?

You will be staying with a Nicaraguan host family with limited English, but with much experience in preparing meals for and attending to international visitors, like yourself. What would you like the family to know about you?

Have you ever traveled outside the U.S. and have you ever been away from home/family for a week or more? If so, where?

Have you ever stayed with a family you didn't know? What was the situation?

Would you prefer a family with children? Teens? Pets?

Would you prefer a more comfortable or a more rustic living situation?

What, if any, are your greatest worries about participating in this trip?

Food& Health

What kinds of foods do you like? Please be specific!

What foods do you stay away from?

Do you have any dietary restrictions or food sensitivities?

Please list any allergies. (e.g. pets, foods, medicines, environmental)

Please list any health issues that may be important for trip leaders to know about. e.g. asthma, diabetes, depression, sensitive stomach. Also, please list any medications you will be taking during the trip.

Can you walk/hike for at least 45 minutes?

Can you climb and descend stairs ok?

Volunteering/Participating

List any experience you have working as a team or in a group or volunteer setting:

Are there any skills you have that you'd like to share or activities you would be willing to lead in Nicaragua?

Would you be available to volunteer with Planting Hope upon your return to the US? In what capacity do you think you could contribute?

Please tell us anything else you'd like us to know!