

Parent Evaluation of Exchange

Your Name: _____

Student's Name: _____

High School/State: _____

Dates of Exchange: _____ Phone/Email: _____

What were the most positive aspects of your experience as a host family?

What were the most positive aspects of sending your son/daughter to Germany as a GAPP exchange student?

Please share any comments or concerns:

Signature: _____ Date: _____

Thank you very much for completing this questionnaire!

I agree that the statements in this questionnaire may be quoted in publications of GAPP.