



## La Crosse Friends of International Students (LFIS) Friendship Family Program

### *What Is It?*

The LFIS Friendship Family Program, in cooperation with UW-La Crosse, Viterbo University, and Western Technical College, is not a live-in program but rather to promote cross-cultural understanding by fostering relationships between international students and La Crosse area residents. You, as a member of the local community who are familiar with how things function in the U.S., will be able to cultivate relationships with students from other countries, enabling you to expand upon your personal experience by learning more about the ways of life in other countries and vice versa. Friendship families may help make the student's transition into American life go more smoothly. This is often an enjoyable and rewarding experience for both families and students.

### *How Do Friendship Families Get Involved?*

Families interested in becoming a friend to a student(s) should complete the following information and send it to the address/email address indicated below. You will be informed of the student(s) assigned to you once the semester commences.

### *What Is Expected?*

You should contact your student(s) after you are matched and invite them to your home for a meal or on an outing (shopping, touring, et cetera). You may invite them to spend American holidays with you, birthday celebrations, outings to historical sites, occupational and professional experiences, sports events, and elementary, middle and high school programs.

### *Please Note:*

- Families are not expected to support students financially or to board these students at your home, nor are you expected to become involved in any legal issues (immigration or other issues) they may experience while in the United States.
- Families that apply for this program are expected to make a commitment to the student until the end of their first academic year, unless they are an exchange student and leave before that.
- Prospective families are expected to undergo a mandatory basic background check for the safety and comfort of our international students and Friendship Families. No substitutions will be accepted. Every individual in the home who is over the age of 18 years must complete the background check. If anyone in the home has been charged with, convicted of, pleaded guilty or no contest to, or forfeited bail for any criminal conduct under law or ordinance, and the nature of the charge or conviction is incompatible with the responsibilities of a friendship family, we reserve the right to deny placing an international student with that family.
- The family authorizes the University of Wisconsin-La Crosse to obtain criminal records about adult members of the family from any source.
- During the course of the Friendship Family assignment, the family agrees to notify the International Education & Engagement (IEE) LFIS liaison, no later than the next day when any member of the family has been convicted of any crime or has been or is being investigated by any

governmental agency for any act or offense. If the family fails to abide by this, we have the right to immediately terminate the family's participation in the Friendship Family Program.

- By signing this form, you acknowledge that you will inform the International Education & Engagement (IEE) LFIS liaison below, of any criminal convictions, pleas of no contest, or pending criminal investigations or household changes since the time of your last background check.

***Friendship Family Tips:***

- Names are important. Your student will know you care if you earnestly try to pronounce their name correctly. Some students adopt an American name to make it easier for us. Ask which they prefer to use.
- Prior to having them over for a meal, please make certain to ask whether they have any dietary restrictions – specifically ask whether they are vegetarian (do not consume meat, fowl or seafood), abstain from pork, et cetera for religious or other reasons and try to be accommodating.
- If you have email, encourage your student(s) to use email because students have email accounts at the university. This is a good way to keep in touch. Try to set a pattern of calling or emailing your student once or twice a week to see how they are doing.
- Encourage your student to join you at least four times a semester for some activity. A home cooked meal is always good. Frequent visits will help your family and the student feel comfortable together and have a more rewarding experience.

Questions may be directed to the IEE LFIS Liaison Miranda Panzer at [mpanzer@uwlax.edu](mailto:mpanzer@uwlax.edu) or 608-785-8823 or to LFIS President Lisbeth Reynertson at [usdk@centurytel.net](mailto:usdk@centurytel.net).

If you are interested in becoming a friendship family for a student(s) at UW-La Crosse, Viterbo University, and Western Technical College please complete the following form and return it via email or mail using the contact information below.

Miranda Panzer  
International Education & Engagement  
University of Wisconsin-La Crosse  
1725 State Street; 1140 Centennial Hall  
La Crosse, WI 54601  
[mpanzer@uwlax.edu](mailto:mpanzer@uwlax.edu)



## LFIS Friendship Family Application

Name: \_\_\_\_\_ Date \_\_\_\_\_

Partner's Name (if appropriate) \_\_\_\_\_

Local Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Tel: \_\_\_\_\_

E-mail address (one per person): \_\_\_\_\_

Profession(s): \_\_\_\_\_

Names of all family members, 18 years of age or older, living at home (all must sign form):

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Do you have pets? If yes, what type? \_\_\_\_\_

Do you have an interest in students from a particular country or geographic region of the world?

Yes No If yes, where? \_\_\_\_\_

Do you have a gender preference for your friendship student(s)? Yes No

If so, please indicate \_\_\_\_\_

Are you able to come to campus to pick up and then return your student for planned activities?

Yes No

What is the MAXIMUM number of students you would like to host? \_\_\_\_\_

How did you hear about the friendship family program?

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Please feel free to add additional comments below:



By signing below, I acknowledge that I have read, understand, and agree to the following:

1. The application information I have provided will be used to conduct a criminal background check, and be used solely for the purpose of evaluating my suitability as a Friendship Family Program participant. I hereby consent and voluntarily authorize the UW-La Crosse to perform such background checks.
2. LFIS is not obligated to match me with a student.
3. I will not engage in proselytizing my religious or political views to the student.
4. We are not liable for the acts or omissions of the participants (volunteers or internationals) in any service or program that it supports.
5. As a participant in the Friendship Family Program, I will not discriminate against any student based on their race, religion, gender, sexual orientation, perceived disabilities, or etc.
6. During the course of the program, all family members agree to notify the International Education & Engagement (IEE) LFIS liaison no later than the next day when any member of the family has been convicted of any crime or has been or is being investigated by any governmental agency for any act or offense. If the family fails to abide by this, we have the right to immediately terminate the family's participation in the Friendship Family Program.

*By signing my name below, I acknowledge and agree that I am participating in the above-described event at my own risk. I agree to indemnify and hold harmless the Board of Regents of the University of Wisconsin System, the University of Wisconsin-La Crosse, their employees, officers, agents, and volunteers, the City of La Crosse and any and all individuals involved with organizing and/or staffing the event, from any and all claims for damages arising out of any personal injury, emotional injury, property damage, or any other cause whatsoever, that may occur as a result of my participation in this event. This release of liability extends to my heirs, successors, and any others acting on my behalf. I affirm that I am responsible for providing my own health insurance to cover any injuries that I may sustain as a result of this event. I understand that by agreeing to this clause I am releasing claims and giving up substantial rights, including my right to sue.*

Name (print)\_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_

Name (print)\_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_

Name (print)\_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_

Name (print)\_\_\_\_\_

Signature\_\_\_\_\_

Date\_\_\_\_\_

Please submit the signed form via email or mail using the contact information below. Thank you!

Miranda Panzer  
International Education & Engagement  
University of Wisconsin-La Crosse  
1725 State Street; 1140 Centennial Hall  
La Crosse, WI 54601  
[mpanzer@uwlax.edu](mailto:mpanzer@uwlax.edu)