



## Homestay application form - Students

<b>Personal Information</b>	
Family name	<input type="text"/>
Given name	<input type="text"/>
Gender	<input type="text"/>
Nationality.	<input type="text"/>
Date of birth	<input type="text"/>
Address	<input type="text"/>
Zip code	<input type="text"/>
City	<input type="text"/>
Country	<input type="text"/>
Arrival date	<input type="text"/>
Departure date	<input type="text"/>

**Please answer the following questions. We will endeavour to make the best possible match but cannot guarantee that all your preferences will be met.**

Would you mind living with young children ?       Yes       No

Would you mind living with a single parent ?       Yes       No

Would you mind living with an elderly couple ?  Yes  No

Would you live with a family that has another student ? (their language would be different from yours)  Yes  No

Would you live with a family that has pets inside the house ?  Yes  No

Are there any foods you can not eat or do not like ?  Yes  No

Do you smoke ?  Yes  No

Would you live with a family that smokes inside the house ?  Yes  No

Please list your interests and hobbies (sports, musical instruments etc)

What is your religion (optional) ?

What are your expectations of your host family ?

Please choose one option.

- Bed & breakfast
- Bed & breakfast + 3 evening meals per week
- Bed & breakfast + 5 evening meals per week
- Half board
- You could say 4 days half board (breakfast + 1 meal) and 3 days full board (breakfast + 2 meals).

How will you pay the host family if you stay more that one month? (Cash, Standing Order, Direct Debit)

## Medical Details

Emergency Contact Information : please provide details of someone we can contact in an emergency:

Family name

Name

Relationship

Address

Zip code

City

Country

Telephone Number

E-mail

What are your allergies (including to pets). Describe if any

Do you have any other information that you think AcTIF needs to know to help us find the best possible match for you.