## ACCOMMODATION REQUEST FORM

<table>
<thead>
<tr>
<th>Family Name</th>
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<tbody>
<tr>
<td>First Name</td>
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<tr>
<td>Date of Birth</td>
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<tr>
<td>Gender</td>
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<tr>
<td>Nationality</td>
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<tr>
<td>Religion</td>
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<tr>
<td>Languages Spoken</td>
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**Would you prefer a shared room or single room?**

- [ ] Shared
- [ ] Single

**Do you want to be placed in a smoking or non-smoking family?**

- [ ] Non-Smoking
- [ ] Smoking
- [ ] Don’t Mind

**Do you have any illnesses, allergies or conditions which your Homestay family will need to be made aware of?**

- [ ] Yes
- [ ] No

If yes, please give details:

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**Are you allergic to:**

1. **Any medication?**
   - [ ] Yes
   - [ ] No

If yes, please give details:

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2. Any food?  Yes □  No □  

If yes, please give details:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________
3. Any Pets?  Yes □  No □  

If yes, please give details:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

**Level of English:**
- Elementary □
- Intermediate □
- Upper-Intermediate □
- Advanced □

**Personality Type:**
- Outgoing □
- Slightly Outgoing □
- Quiet □
- Shy □

What foods do you like?
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

What foods don’t you like?
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

Do you have any hobbies?  Yes □  No □
If yes, what are they?
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________
_________________________________________________________________

I would prefer a home/house: (you make choose more than one)

With other children my age
With other children of a different age
I don’t mind
With pets
Without pets
With no other students from my country
With students from my country

If the student is under the age of 18, please have a parent or guardian sign and date below, to verify the above information:

_____________________________
Parent or Guardian’s Signature

Date ___ / ___ / ___