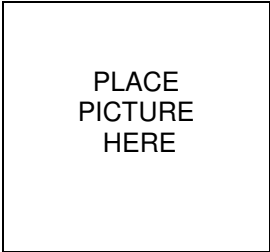




San Diego Coastal Homestays

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STUDENT APPLICATION

Please print clearly or type

Name- Last _____ First _____ Date of Birth (mm/dd/yy) _____
 Applicant's Address _____ Age _____ Sex _____
 City _____ Postal Code _____ Nearest major city _____
 Country _____ Phone _____ E-mail _____

Family Members:

Name	Relationship	Age	Occupation

Would you prefer staying with a family Alone (We cannot guarantee solo placement)
 With a friend- Name _____
 With a student from another country
 Doesn't matter

What is your native language? _____

What additional languages do you speak? _____

How long have you studied English? _____

English speaking ability Poor Fair Excellent

Previous stays abroad _____

Do you have any allergies? Yes No What type? _____

Are you taking any medication? Yes No What type? _____

Do you have any physical restrictions? Yes No Explain _____

Is it okay to be placed in a home with someone who smokes? Yes No

Do you smoke? Yes No If so, you may be required to smoke outside.

Do you like pets? Yes No What kind? _____

Do you like small children? Yes No

How would you describe yourself? Timid Outgoing Sociable Adaptable
 Other _____

Would you prefer a quiet home or an active home? _____

Would you like to be placed with a family that attends church? Yes No Doesn't Matter

What is your religious preference? _____

Favorite hobbies, sports, interests, etc. _____

What is your favorite subject in school? _____

What are your favorite foods? _____

What foods don't you like? _____

Do you have any special talents? (Music, dancing, acting, etc.) _____

