



Vesalius College v.z.w.

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HOST FAMILY PROGRAMME REQUEST FORM

Fill in this form as carefully as you can to help us find the best "family" for you. Bear in mind that some of your preferences may not be satisfied. You might therefore want to indicate your priorities. It may not be possible to satisfy all your preferences, so indicate any priorities.

Family Name:

First Name:

College/University:

Major Programme:

Personal information

Home address:

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Phone: Mobile phone: E-mail:

Date of Birth: Place of Birth:

Sex: Male Female

Do you smoke ? Yes No

Do you have allergies ? Yes No

If so, please give details:

Are you a vegetarian ? Yes No

If so, how strict:

List things you do not eat:

For non-vegetarians: are there any foods you dislike? Or do you have any preferences in your diet?

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Are there any restrictions in your diet for religious or physical reasons?

.....

Are you willing to change your eating habits whilst participating in the home stay program?

Yes No

Do you take any special medication or need any special treatments? Yes No

If so, please give details:
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Have you ever traveled or lived in a foreign country? Yes No

If so, where and for how long?

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Have you participated in a home stay program before? Yes No

If so, where and for how long?

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What social, cultural, religious or other activities do you enjoy in your free time?

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.....

Which foreign language, if any, do you plan to study while at Vesalius College?

Dutch French None

Which foreign language(s) have you previously studied and how many semesters?

.....
.....

Your preferences

Which type of host family would you prefer? Number the following list in order of preference (1 = most preferred)

Young couple with children Family with children your own age

Older couple Single person

Do you have any brothers or sisters? If yes, how many:

Do you mind living with smokers? Yes No

Do you object to pets? Yes No

Is internet an absolute must to you? Yes No

Are you willing to share with another student? Yes No

You would prefer your host family to speak:

Dutch French Other (specify)

What do you expect from your host family? How much would you like to be integrated into the family? Please mark the items in the following list that are important to you:

evening meal with the family own cooking facilities

evening activities weekend activities

other (please specify):

.....

Are you of an independent nature or is contact with your host family vitally important?

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Please use the rest of this page, or add a separate sheet if necessary, to give any other information that might help us match you with the most suitable family, for example, interests and hobbies, travels, social activities, religion, etc.

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