

Host Family Program Application

Name: _____ How do you prefer to be called? _____

Nationality: _____ Religion (optional): _____

Date of birth: _____ Gender: _____

Field of study: _____

Undergraduate • Graduate • Exchange •

Are you allergic to pets? _____ Do you like children? _____

Are you a vegetarian or do you have any dietary restrictions? If yes, please specify. _____

Are you a smoker or non-smoker? _____

Do you speak any other languages? _____

If yes, which ones? _____

Favorite foods: _____

Special talents: _____

What do you hope to gain through participation in this program?

Please list hobbies: i.e. music, sports, travel, collecting certain items, academic interests outside of your field of study. Try to be as specific as possible.

Is there anything in particular you would like to learn about Richmond or a place you would like to visit during your academic career at the University?

PLEASE RETURN TO THE OFFICE OF INTERNATIONAL EDUCATION

ATTENTION: KRITTIKA ONSANIT