

## WVU International Student Homestay Request Form

Dates you plan to live in a homestay : From: \_\_\_\_\_ to: \_\_\_\_\_

Name: \_\_\_\_\_ Country: \_\_\_\_\_ Language: \_\_\_\_\_

Age: \_\_\_\_\_ gender: Male Female Married: yes no

Address: \_\_\_\_\_

\_\_\_\_\_

What is the best way to reach you ? circle one: e-mail, FAX, phone and give info:

\_\_\_\_\_

I will be a \_\_\_ full-time \_\_\_ part-time IEP student. \_\_\_\_\_ other. Visa type: \_\_\_\_\_

My English level is: \_\_\_ beginner, \_\_\_ intermediate, \_\_\_ advanced

**Personal information** this will help us find a home that matches your lifestyle:

1. Do you smoke? Yes no If yes, can you smoke outside only? Yes no

2. **Almost all our homes have pets** (generally cats and / or dogs).

Please check if these are a **problem** for you : \_\_\_ dogs \_\_\_ cats \_\_\_ other

3. Diet: List any allergies or foods / drinks that you can **not** eat / drink?

\_\_\_\_\_

4. What are your hobbies or interests? \_\_\_\_\_

5. What are you studying in school (or job) now ? \_\_\_\_\_

6. What are your plans after the IEP? \_\_\_\_\_

7. Why do you want to live with an American Family? \_\_\_\_\_

8. Other requests or considerations? \_\_\_\_\_

**EMERGENCY info:** while you are here, who should we contact in case of emergency?

Name: \_\_\_\_\_ relationship: \_\_\_\_\_

How can we reach them? : \_\_\_\_\_

\*\*\*\*You **must have health insurance** for the entire time you are living in a home.

Will you come with health insurance? Yes no

**There is a \$200.00 (US \$) one- time homefinder's fee** that you need to pay when the agreement is finalized and you move into the home.

**Thankyou for your application.**

**Karen Allen:** Homestay coordinator

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