



# International Friendship Program Host Application

## Host Information:

I am applying as a:  Community member/family  SCSU Student  SCSU Faculty/Staff

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

SCSU ID#(if applicable): \_\_\_\_\_ Gender: Male  Female:  Other:

Phone (home): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Email address: \_\_\_\_\_

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

How long do you intend to participate in this program?  One-time  Semester  Year  Continuous

## Dependent (spouse/children) Information:

Do you have any dependents who wish to join you in your participation in this program? Yes  No

Spouse/Partner's Name: \_\_\_\_\_

Child/children's names/ages: \_\_\_\_\_

## Hobbies/Interests/Skills:

Have you travelled/lived abroad (explain)? \_\_\_\_\_

What languages do you speak? \_\_\_\_\_

Do you have any dietary preferences/restrictions/allergies? \_\_\_\_\_

Do you have any pets (type, indoor/outdoor, how many)? \_\_\_\_\_

List your interests, hobbies, goals, travel experience, etc. (this information will help in matching you, so please be specific): \_\_\_\_\_

What would you like to gain from your participation in this program? \_\_\_\_\_

## Student/Scholar preference (to be matched with): *select all that apply*

Type:  Undergraduate  Graduate  Doctoral  Visiting Scholar

Gender: Male  Female  No preference  Pets: Yes  No  No preference

Have dependents (spouse/children): Yes  No  No preference

What is the total number of individuals you would like to be matched with? \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_