

Thanksgiving Program at St. Cloud State University



Thanksgiving is a unique holiday that dates back to early North American history. It is a secular holiday intended as a time to celebrate the fall harvest and to give thanks in general. Families may celebrate the holiday in a number of ways, but as with many holidays, food is often the focus! In celebrating Thanksgiving with a local community member/family or SCSU Faculty/Staff member, you will likely enjoy many delicious foods: turkey, mashed potatoes, cranberries, stuffing, pumpkin pie, and other family favorites!

As an international student or scholar, surely one of the reasons you chose to come to the United States is to learn more about the culture. We encourage you to take advantage of any opportunity to interact with members of the SCSU community as this allows you to not only learn more about the way of life in the U.S., but to teach others about your own country and culture.

If you are interested in participating in the Thanksgiving Program, complete the application below and return it to the Center for International Studies. Students and scholars will be matched and emailed according to their preferences.

To sign up for the Thanksgiving Program, please submit an application to:

**Center for International Studies
Lawrence Hall 101
720 4th Ave. South
St. Cloud, MN 56301**

For more information about other ways to get involved with in the international programming and opportunities at St. Cloud State University, contact:

Center for International Studies
cisga2@stcloudstate.edu
320-308-4287



Thanksgiving Program Student/Visiting Scholar Application

Application Deadline: November 16th

Student/Visiting Scholar Information:

I am applying as a/an: ☐ Undergraduate ☐ Graduate ☐ Doctoral ☐ Visiting Scholar

Last Name: _____ First Name: _____

SCSU ID#: _____ Gender: Male ☐ Female: ☐ Other: ☐

Major/Department: _____ Phone number: _____

SCSU e-mail: _____ Personal e-mail: _____

Preferred Method of Communication: ☐ Phone ☐ SCSU e-mail ☐ Personal e-mail

Address: _____ Home country: _____

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:

In what countries have you lived? _____

What language(s) do you speak? _____

Do you have any dietary preferences/restrictions/allergies of concern? _____

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? _____

Host preference (to be matched with): *select all that apply*

Children: Yes ☐ No ☐ No preference ☐ Pets: Yes ☐ No ☐ No preference ☐

Type of host: ☐ Community member/family ☐ SCSU Faculty/Staff

Student Signature: _____ Date: _____