HOMESTAY PLACEMENT INFORMATION

FULL NAME		
BIRTHDATE		
FAMILY		
DO YOU HAVE BROTHERS AND / OR SISTERS?		
AGES?		
DIET AND FOOD		
VEGETARIAN VEGAN NO SPECIAL RE	EQUESTS	
OTHER DIETARY RESTRICTIONS:		
FAVORITE FOOD		
FAVORITE KIND OF DESSERT		
OTHER DATA OF INTEREST		
DO YOU LIKE SPENDING TIME WITH YOUNG CHILDREN?	YES	NO
DO YOU LIKE ANIMALS?	YES	NO
DO YOU HAVE A PET?	YES	NO
TYPE OF PET:		
ANY HOBBIES?	YES	NO
TYPE OF HOBBIES:		
DO YOU TEND TO LIKE GOING OUT OR STAYING	in?	
WHAT KINDS OF ACTIVITIES DO YOU ENJOY IF Y	YOU LIKE GOIN	NG OUT?
DO YOU SMOKE?	YES	NO
DO TOO DINORE.	ILS	
IF NOT, DO YOU TOLERATE SMOKING?		