

## Homestay Application

Family Name: Yamada	First Name:_Hanako				
Sex: Male ✓ Female Date of	ate of Birth:	Jan	01	1995	Age:22
		Month	Day	Year	
Homestay Start Date: Aug/06/201	17	Checl	k Out Date	e:Sep/02/	2017
Flight Information					
Arrival Date: Aug/06/2017	umber		Arrival Ti	me:	
Departure Date: Sep/02/2017	umber		_ Departure	_ Departure Time:	
Do you need airport pick-up? (Highly	recomn	nended for	Arrival)		
Arrival Only Departure Only				No, Tha	ank You
Are you a smoker?	Yes	√No			
Do you have any allergies? If yes, what allergies do you have? _	Yes	✓ No			····
Do you have any health conditions? If yes, what health conditions do you		•			
Are you taking any medication? If yes, what medication are you takin					
What is your occupation? What are your hobbies? <del>Tennis and</del>	reading bo	ooks.		_or Are you	a student?
Is a family with children okay?	′es v	/No			
Is a family with pets OK?  Yes, inside or outside the house I don't want a family that has(type of pet(s): ex. cats, big dogs, etc)  No, I don't want a family with pets at all					
What is your English level? √Beç	ginner	Interme	ediate	Advanced	d
Do you have any special needs? N/A					
Signature:   山田花子	<u></u>		D	oate: Jul/01/	2017
Signature of Parent or Guardian if Yo	ou Are U	nder 18 Ye	ears Old:		
Signature	Date				
Printed Name	Relationship				

www.studyenglishhawaii.com Email:mroth@iiehawaii.com Phone: (808) 924-2117 Fax: (808) 924-3227

Revised: Feb. 6, 2015