

Homestay Form

* It is not obligatory to fill up all the blanks below.

1. Name <input type="checkbox"/> Male <input type="checkbox"/> Female			
Family Name		First Name	
Nickname (If any)			
2. Birthday : ____/____/____ (Date) (Month) (Year) (Age)			3. Grade <input type="checkbox"/> Junior High <input type="checkbox"/> Senior High Year :
3. Current Address : TEL : +46(0) Mobile : +46(0) E-mail Address : (Social media accounts:)			
4. Emergency Contact : <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian) Family Name First Name Address : <input type="checkbox"/> Same as above TEL: : +46(0) Mobile : +46(0) E-mail Address :			
5. Family Members & Pet(s) :			
Name:	Relation:	Age:	Profession :
6. Hobbies :			

7. My favorite sport : <input type="checkbox"/> baseball <input type="checkbox"/> basketball <input type="checkbox"/> tennis <input type="checkbox"/> soccer <input type="checkbox"/> swimming <input type="checkbox"/> others :
8. My personality : <input type="checkbox"/> sociable <input type="checkbox"/> cooperative <input type="checkbox"/> high achiever <input type="checkbox"/> quiet <input type="checkbox"/> positive <input type="checkbox"/> energetic <input type="checkbox"/> shy <input type="checkbox"/> studious <input type="checkbox"/> curious <input type="checkbox"/> others or any comments :
9. Religion / Faith : <input type="checkbox"/> nothing specific <input type="checkbox"/> Buddhist <input type="checkbox"/> Shintoist <input type="checkbox"/> Christian (<input type="checkbox"/> Roman Catholic <input type="checkbox"/> Lutherian <input type="checkbox"/> Other :) <input type="checkbox"/> Muslim <input type="checkbox"/> Other ()
10. English ability : <input type="checkbox"/> Very fluent <input type="checkbox"/> Fluent <input type="checkbox"/> Fair <input type="checkbox"/> Poor
11. Allergies and/or restriction of food and/or life :
12. Self-introduction :

13. Picture of me and my family :

Date : / /2017
 dd mm yyyy