



Homestay Application Form

Photograph, if available

Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Last name		First Name	
Home Address			
Home Telephone Number <i>(country code + area code + number)</i>		Fax Number <i>(country code + area code + number)</i>	
E-mail		Date of Birth (day/month/year)	
Passport No.		Insurance <input type="checkbox"/> Covered <input type="checkbox"/> Not covered	
Nationality	Native Language		Occupation
Period of stay in Japan FROM _____ TO _____			

Do you smoke? Yes No

Do you prefer to stay with a family: with children without children no preference

with pets without pets no preference

a smoking family a non-smoking family no preference

Do you have any allergies? No Yes _____

Are you taking medication? No Yes _____

Do you have any disabilities? No Yes _____

Are there any foods you cannot eat? No Yes _____

Language ability (Apart from native language)

Japanese : Excellent Everyday conversation Fair Poor

English: Excellent Everyday conversation Fair Poor

Chinese : Excellent Everyday conversation Fair Poor

Korean: Excellent Everyday conversation Fair Poor

French: Excellent Everyday conversation Fair Poor

Other language _____: Excellent Everyday conversation Fair Poor

What are your hobbies & interests?

Arrival Date: ____ / ____ / ____ Time: _____ AM/PM Flight #: _____
(day/month/year)

Departure Date: ____ / ____ / ____ Time: _____ AM/PM Flight #: _____
(day/month/year)

If my host family's conditions do not agree with mine (such as smoking), I will fulfill my host family's requests.
I hereby waive any right I may have to hold Matsuyama International Center or my host family responsible for any damage to my personal property or bodily injury to myself due to an accident of any kind.

Signed

Date