



EXCHANGE QUESTIONNAIRE

Student's information:

Name and surname					
Date of birth		Gender		Phone number	

Family contact:

Address:					
Email address (one of the parents)					
Father's name and surname		Job		Phone number	
Mother's name and surname		Job		Phone number	
Siblings					
Pets					

Information for the exchange:

What means of transport do you use to go to school?			
I would like to host a student of...	<input type="checkbox"/> The same sex	<input type="checkbox"/> The opposite sex	<input type="checkbox"/> I don't mind
I would like to be hosted by a student of...	<input type="checkbox"/> The same sex	<input type="checkbox"/> The opposite sex	<input type="checkbox"/> I don't mind
Where would the foreign student sleep?		Have you got any allergies?	
Do you have a special diet?			

Comments:

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