

Hope College
Host Family Program
International Student Form

Date:		
Full Name:		
What do you prefer to be called?		
Gender: Male Female (circle one)		
Email Address:		
Home Address:		
Birth Date: day / month / year	Age:	Birthplace:

*** Describe your family:**

*** Describe your hometown:**

*** Describe what you intend to study at Hope College, career choices and future aspirations:**

*** Describe any extra-curricular activities in which you are involved (i.e. sports, organizations/clubs):**

*** What is your favorite way to spend your free time? Do you have any hobbies?**

*** What is your favorite food?**

*** Are you allergic to any food or other things? Yes No (circle one)**

If yes, describe_____

*** Write a brief message to your future host family:**

Sign your name here