**PUPIL FORM**

**ATTACHED: Information regarding homestay**

*To be completed and submitted after the application is accepted. This information will be used to match the student with the most suitable partner/host family.*

**1. Student’s name and surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. Personal contacts: cell phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. Parents’ contacts: cell phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**. Medical needs and health restrictions**

Do you have any disabilities (physical and non-physical limitations) or allergies that might affect accommodation or participation in daily family and/or school activities?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I can’t live with:

|  |  |  |  |
| --- | --- | --- | --- |
| ¨ Cats | ¨ Dogs | ¨ Other pets  |  |

**5. Dietary needs**

Do you have any special dietary needs, e.g., for medical, religious reasons or personal choice?

|  |  |  |
| --- | --- | --- |
| ¨ Yes | ¨ No |  |
| If your answer is yes, please explain:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

If you are vegetarian, you are willing to eat:

|  |  |  |
| --- | --- | --- |
| ¨ Fish | ¨ Poultry | ¨ Dairy products |

**6. Smoking**

Do you smoke?

|  |  |
| --- | --- |
| ¨ Yes | ¨ No |

Do you need to be hosted in a non-smoking house??

|  |  |
| --- | --- |
| ¨ Yes | ¨ No |

**7. Other**

Are there other aspects to consider in order to match the student with a suitable host family?

|  |  |  |
| --- | --- | --- |
| ¨ Yes | ¨ No |  |
| If your answer is yes, please explain:  |

**8. For travel purposes**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Town of birth: |   |  | Country of birth: |  |
| Date of birth: |  |  |
| Nationality: |  |  |
|  |
| **Passaport/ ID Card:**  |
| Number: |  |  | Date of issue:  |  |
| Place of issue: |  |  | Expiration date: |  |

**9. Candidate's photo**

Attach a page with some photos of you, your friends and family. You can add additional pages if you wish.

**10. Cover letter**

Attach an introductory letter in the language used for communication between your school and the host school. This letter will be forwarded to the host school and the host family.

**11. Signature**

|  |
| --- |
| I, the undersigned, give my consent to the home school to transmit the personal data entered in this form to the host school and host family for the purpose of the long-term Pupil Mobility provided within the Erasmus+ Program. These data will also be communicated to the National Agencies responsible for the Erasmus+ Program. All persons coming into contact with these data will have to treat them as confidential.Name(s) and signature(s) of parent(s) and/or guardian(s)/ i (Date) Student's name and signature (Date) |