**'Getting to know you'**

Personal information

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male:\_\_\_ Female:\_\_**

**Return Student: Yes\_\_\_\_ No \_\_**

**If yes, would you like to stay the same host family: Yes\_\_\_ No\_\_**

In order to help us in our research for a suitable host(s) during your stay here and for your better comfort, please let us know more about your personal needs and interests.

a) Allergies? - do you have any allergies such as to cats/dogs etc?

b) Interests - what do you like to do in your free time at home?

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c) What would you like to enjoy in your free time here at Atlantic S.E.A.L.?

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d) Do you have any dietary intolerances or requests (no pork, vegetarian, coeliac etc)

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e) Would you like a smoking or non-smoking family?

We have some very nice hosts in easy walking distance of the school which is in the centre of our small town. However some are smokers and some are not.

Would you be so kind as to confirm whether (Please tick)

You are a smoker and would like to live in a home where smoking is no problem

You are NOT a smoker and do NOT want to be in a home where the host smokes.

You are NOT a smoker but have no problem living in a home where the host smokes.

f) Which age group do you belong to?

12-20 \_\_\_ 20-35 \_\_\_ 35-45\_\_\_\_\_45-55\_\_\_\_\_55-65+\_\_\_\_

g)Is there anything else you can tell us to help us match you with a suitable host and to ensure your comfort while here (please feel free to use an extra page to let us know more if you wish)

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h) Do you have any \*medical issues (physical and/or mental) that we & the host family should be aware of? Please give specific details.

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*\*The school, its staff and host family cannot be held responsible for any inaccurate or non-disclosure of this type of information.*