

<p>STUDENT INFORMATION Please TYPE or CLEARLY PRINT</p> <p>Last Name (Family name)</p> <p>First Name (Given name)</p> <p>Street Address (home)</p> <p>City Province/State</p> <p>Country Postal Code</p> <p>Telephone (with area code) Fax</p> <p>E-mail</p> <p>Male Female Date of Birth ____/____/____ mm dd yyyy</p> <p>Nationality:</p> <p>Native Language:</p> <p>What program are you applying for:</p> <p>Emergency contact person</p> <p>Emergency telephone number</p> <p>Emergency e-mail address</p> <p>Emergency fax number</p> <p>Move-in date Move-out date (application will not be processed without move-in/move-out dates)</p> <p>AGENCY/SPONSOR(If applying through an agency. To be filled by sponsors only)</p> <p>Agency/Sponsor Name Agency ID#</p> <p>Telephone Number (Required) Fax Number (Required)</p> <p>E-mail (Required)</p> <p>Contact Person</p>	<p>PERSONAL INFORMATION</p> <p>Do you smoke? Yes No</p> <p>If you smoke, are you willing to stay with an American family in which you could not smoke inside the house? Yes No</p> <p>If you are a non smoker, would you mind staying with a smoking family? Yes No</p> <p>(Please note that in some circumstances, we may NOT be able to accommodate you if you smoke and are unwilling to smoke outside.)</p> <p>Most American families have pets. If you answer NO to any of the following questions, it may take us longer to find you a homestay. While we will make every effort to accommodate your preferences, there is no guarantee we will be able to do so.</p> <p>Would you prefer a family with children? Yes No No preference</p> <p>May we place you in a family that has cats? Yes No</p> <p>May we place you in a family that has dogs? Yes No</p> <p>Foods you will not eat:</p> <p>Favorite Foods:</p> <p>Allergies:</p> <p>Physical handicaps:</p> <p>Your interests:</p> <p>Your character:</p> <p>Your Occupation:</p> <p>Your Family Information (Name, Age, Relationship, Occupation):</p>	<p>HOMESTAY FEES</p> <p>Programs 10 weeks or longer: \$800 per month*; \$27 per day* for any portion of a week.</p> <p>Programs less than 10 weeks: \$200 per week* and \$29 per day* for any portion of a week.</p> <p>*These fees include a double occupancy room and 3 meals per day. You may be required to make your own breakfast and lunch with food provided by the family. The family is responsible for making your dinner and for transportation to and from UC Riverside Extension for university- sponsored events and classes.</p> <p>IMPORTANT INFORMATION</p> <ol style="list-style-type: none"> 1. You must send a \$ 150 non-refundable placement fee. Make cashier’s check/money order payable to: “UC Regents.” 2. This form should be received at least 3 to 4 weeks before your arrival. (The earlier the better due to limited space.) 3. We cannot guarantee that you will be placed in a home that satisfies all your preferences. The earlier we receive your application, the better chance we have of placing you with a family that meets your requests. 4. If your plans change, you must inform us of your new arrival information in advance or if you cannot come, please let us know immediately 5. Please attach a letter to your American family and a photograph. <p>Student Signature (Required): “I certify that the information on this entire form is correct to the best of my knowledge.”</p> <p>Signature _____ Date _____</p> <p>Parent or Guardian Signature (if minor)</p> <p>Please mail, fax, or e-mail your completed application and payment of fees to: International Education Programs, UC Riverside, Extension, 1200 University Avenue, Riverside, CA 92507-4596, U.S.A. Phone: (1-951) 827-4423, Fax: (1-951) 827-5796 E-mail: iep_application@ucx.ucr.edu</p>
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