

**FRENCH PROGRAM**  
**UCO-CIDEF/ Angers (France)**  
**Summer 2019**

**FAMILY PLACEMENT FORM**

PLEASE DOWNLOAD, COMPLETE AND SEND TO: [giacchetti@uh.edu](mailto:giacchetti@uh.edu)

NAME: \_\_\_\_\_

Student ID number: \_\_\_\_\_

Email: \_\_\_\_\_

Cell: \_\_\_\_\_

**Emergency contact in the US:**

Name \_\_\_\_\_ Phone number \_\_\_\_\_

Relationship to student \_\_\_\_\_

*Homestay standard accommodation:*

*Private room, private or semi-private bathroom.*

*All students are expected to share all planned meals with families.*

THIS QUESTIONNAIRE WILL ONLY BE USED TO MATCH EACH STUDENT WITH THE MOST SUITABLE FAMILY, AND IS STRICTLY CONFIDENTIAL. You may disregard any question you do not wish to answer. However, please understand that unanswered questions or vague responses may hinder our ability to find the most suitable family.

1. Describe your ability to speak French.  
- Using a scale of 0 to 10, 10 being "near fluency" and 0 being "true beginner" how would you rate your level?
2. Have you participated in a study abroad program before? If so, where? Did you stay with a family? Please tell us what you liked or didn't like about your experience.

3. Do you have any dietary preferences (such as kosher, vegetarian, gluten-free, etc.)? Please note that while we will do our best to accommodate all requests, very restrictive diets such as “vegan”, will limit your options.

4. Are you allergic to certain foods? Please provide a specific list. This is NOT a question about food preferences!

5. Do you have any known allergies to certain drugs? Please elaborate.

Note: all prescriptions for medication must be filled in the US before departure. US medical prescriptions cannot be filled in France.

6. Do you have any health restrictions that may affect your ability to participate in some activities/excursions in France?

7. Do you have any disability that will require special accommodations while in France?

8. Do you suffer from anxiety, insomnia or other disorders that may affect your mood/wellbeing while in France?

9. We want to ensure that every student has a comfortable family placement, so please share below if you have any concern about family placement in regard to your gender, sexual, religious or cultural identity. I am happy to meet with you in person to discuss your concerns.

10. Do you smoke?      Yes      No      Occasionally

Note: when allowed by families, smoking is usually restricted to outdoors areas.

11. Do you object to \_\_\_\_

- a. Small children in the house
- b. Dogs/cats in the house
- c. single person family
- d. Other

12. Most families in Angers will host other international students on year-long programs. Do you object to staying with other international students in the home?

YES                      NO

13. Do you mind sharing a family with another student from our group?

YES                      NO

14. You may request to stay in the same house as another student from our group. Please give name of student: \_\_\_\_\_

*Note: this request will be subject to availability. If the student you listed does not list your name on his/her application form, we will not fulfill this request.*

15. What should the director know about you that you think might be helpful when selecting your French family?