

## Host Family Program Student Information Form

Please complete this form and give it to the International Student Advisor. This information will be shared with your host family.  
Please print clearly.

Date:

Name:

Citizen of (city and country):

Vincennes address (dorm or off-campus address):

Telephone:

Cell phone:

Email:

What is the best way to contact you?

Date of arrival to VU:

Age: \_\_\_\_\_  Female  Male

Area of Study:

Plans after graduation:

Interest and hobbies:

Food that you CANNOT eat:

Allergies (if any):

Do you like children?

When do you prefer to be invited (check all that apply):

- |   |   |
|---|---|
| <input type="checkbox"/> Any time of the year | <input type="checkbox"/> University Vacations |
| <input type="checkbox"/> Weekends only        | <input type="checkbox"/> Any day of the week  |

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