

University of Houston
DEPARTMENT OF MODERN & CLASSICAL LANGUAGES

Angers Program
May 22 – June 24, 2007
FAMILY PLACEMENT FORM

PLEASE DOWNLOAD AND SEND AS ATTACHMENT TO
giacchetti@uh.edu

OR:

Bring to the MCL office, 4th floor, Agnes Arnold Hall, room 416.

Standard accommodations:

Private room, bathroom shared with other student or family member.

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

NAME OF STUDENT: _____

M / F

Married/ Single

DATE OF BIRTH: _____

PLACE OF BIRTH : _____ **(CITY + STATE) –required for French student ID.**

UH ID number: _____

EMAIL ADDRESS (please print) : _____

PHONE NUMBER: day _____ **evening** _____ **cell** _____

EMERGENCY CONTACT:

NAME _____ **Phone number** _____ **relationship to student** _____

1. Describe your ability to speak French.
- Using a scale of 1 to 10, 10 being "near fluency" and 1 being "true beginner" how would you rate your level?
2. Have you participated in a study abroad program before? If so where?
3. Do you have any dietary restrictions (such as vegetarian diet, etc.)?
4. Are you allergic to any foods? Please list.
5. Do you have any 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, problems, issues, which may affect you while in France? Please understand that a UH medical disclosure form will be required of all participants.

7. Do you smoke? Yes No Occasionally

PLEASE NOTE: when allowed by families, smoking is usually restricted to outside areas.

8. Would you object to staying with a family whose members might smoke? YES NO

9. Do you mind families with small children? YES NO

10. Do you mind pets in the house? YES NO

11. Do you have any disability which will require special accommodations while in France? Please keep in mind that French law is not subject to U.S. ADA requirements.

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

a. YES I want to be the only student

b. YES, no more than 1 other student

d. NO

*If your answer was **a or b**, please understand that this family will expect your **full** participation in **all** family activities.*

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.

15. Please give other pertinent information which you think might be helpful in your family placement, or that we should be aware of to insure the success of your stay in France.

NOTE: Certain rules of conduct apply to participants in accordance with the UH policies (see Student handbook), as well as the policies of this program (see “program policies”). For details, contact Dr. Giacchetti, giacchett@uh.edu