



Housing Request Form

International Program in Toledo

Write legibly in ink or type. Be completely open and honest; your answers will have no bearing on your participation in the program. The Learning Abroad Center cannot guarantee that your housing choice and all your preferences will be met, but the housing coordinator will use the information to arrange a compatible placement. **Please be prepared to be flexible. All housing arrangements, once established by on-site program staff, are subject to change.**

First name: _____ Last name: _____ Birthdate: ____/____/____ Gender: M F

Term: May Fall Spring Summer Academic Year

Choose Housing Option: (check one)

_____ **Homestay**

- Students pay an additional fee for the Homestay option. See www.umabroad.umn.edu for more information. Some institutions make arrangements to pay this difference on behalf of their students.
- If you choose to move to a homestay while in Toledo, please be prepared to pay the fee on-site.
- If a student chooses to stay in the Residence but later decides on a homestay, they will need to stay in the Residence until appropriate arrangements are made.

_____ **Residence** (San Juan de la Penitencia)

Please rank your preference (#1 as your first choice)

Single room _____

Double room _____

Triple room _____

- Rooms will be assigned on a first-come, first-served basis.
- We will use the date of receipt of this form and your deposit to establish priority.
- All rooms in the Residence are suites adjoined to the neighboring room by a bathroom.
- Every effort will be made to arrange for non-native English-speaking roommates for native English-speaking students.
- The cost of living in the Residence is included in the program fee.

Personal Information, Health, & Preferences

1. Do you smoke? Y N

2. Are you allergic to smoke? Y N

3. If you do not smoke, would you accept placement in a smoking apartment/room if necessary? Y N

Under what conditions? _____

Please keep in mind that the majority of Spaniards smoke.

4. Do you have any allergies? Y N If yes, please specify any allergies: _____

5. Are you taking any medication we should be aware of? Y N

If yes, please specify: _____

6. Is there any information we should know about your physical condition? _____

7. Do you have any special dietary needs/restrictions? Y N If yes, please specify: _____

Vegetarians should be aware that not all of the foods you eat at home will not be available overseas.

8. Indicate how you feel about a placement with:

Children	<input type="checkbox"/> Very important	<input type="checkbox"/> Important	<input type="checkbox"/> Indifferent	<input type="checkbox"/> Would prefer not
Pets	<input type="checkbox"/> Very important	<input type="checkbox"/> Important	<input type="checkbox"/> Indifferent	<input type="checkbox"/> Would prefer not
Smokers	<input type="checkbox"/> Very important	<input type="checkbox"/> Important	<input type="checkbox"/> Indifferent	<input type="checkbox"/> Would prefer not

9. The Fundación sends some students to stay with families that live in the suburbs. These families have very comfortable homes but, as in the US, some of these areas have limited public transportation. In these cases the host families would take you back and forth to school and to events as they do their children. Would you mind living in one of these homes? Y N

10. Please write any additional comments below.

Language Agreement

I agree to speak Spanish everywhere, even with fellow students. "Everywhere" includes my residence, the university, vehicles on which the program groups are traveling, and all places visited on excursions and field trips. I also understand that Resident staff will use only Spanish in speaking with me unless an emergency, medical or otherwise, requires use of English.

Name (please print) _____ Term _____

Signature _____ Date _____

Learning Abroad Center

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