CUAbroad
Rome Housing Preference Form

Name (Last, First) __________________________________________ Abroad Term (semester & year) ________________________________

Sex ____________________________ Birthday (day/month/year) __________________________ Major & Minor ____________________________

Circle your selected Track:  

The Italian Immersion Track (live with host family)  
The Liberal Arts Track (live in dormitories)

Circle your fluency in Italian:  

None Poor Fair Good Excellent Fluent

Circle any of the terms that describe you

Organized Independent Adventurous Social Quiet Talkative

Loner Shy Extroverted Noisy Untidy Tidy

Light eater Moody Early to bed Night owl Early riser Later riser

Willing to adapt Sense of humor Studious Curious Religious

Picky eater Eat anything Easy to please

Health Information

Are you diabetic? YES NO
Do you have ulcers? YES NO
Do you have allergies? (food, pets, medicines, etc.) YES NO
Do you smoke? YES NO
Are you a vegetarian? YES NO
Do you have any special dietary needs? YES NO
Do you take medication on a regular basis? YES NO

If so, name of prescription(s)

If you answered yes to any of the above questions, please be as specific as possible about the nature of those conditions. Vegetarians should be aware that the foods you eat at home may not be available in Italy.

Comments/Explanations from the above:
Keep in mind that in general, more people smoke overseas than in the US. Also, many families have dogs or other pets.

Please indicate how strongly you feel about living in a family with:

<table>
<thead>
<tr>
<th>Smokers --</th>
<th>Strongly against</th>
<th>Slightly against</th>
<th>Indifferent</th>
<th>Prefer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pets --</td>
<td>Strongly against</td>
<td>Slightly against</td>
<td>Indifferent</td>
<td>Prefer</td>
</tr>
</tbody>
</table>

Do you have any physical disabilities? If so, please describe below:

What are your major educational and academic interests?

What are your leisure and recreational interests?

Please add any information that you think would be helpful in finding a suitable host family for you. Keep in mind that not all preferences can be honored.

SIGNATURE

I, ___________________________________, certify that all responses made on this form are true and accurate. I understand that this form is for information purposes and that it may be shared with potential host families.

Signed (Student) _______________________________         Date (month/day/year)