

INFORMATION SHEET

1. PERSONAL INFORMATION

GUEST

LAST NAME:

FIRST NAME:

GENDER: F / M

AGE:

NATIONALITY:

ADDRESS:

TELEPHONE NUMBER:

MOBIL TELEPHONE NUMBER:

EMAIL:

SPECIAL FOOD DIET:

HEALTH PROBLEMS (allergies, diseases, disabilities):

LANGUAGES SPOKEN:

PERSON TO CONTACT IN CASE OF A PROBLEM:

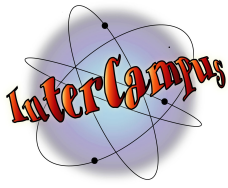
LAST NAME:

FIRST NAME:

TELEPHONE NUMBER:

EMAIL:

HOW DO YOU WISH TO TRAVEL?



HOST

LAST NAME:

FIRST NAME:

GENDER: F /M

AGE:

NATIONALITY:

ADDRESS:

TELEPHONE NUMBER:

MOBIL TELEPHONE NUMBER:

EMAIL:

AVAILABILITY DURING THE STAY (exams, internship, holidays):

PETS:

SPECIAL FOOD DIET:

HEALTH PROBLEMS (allergies, diseases, disabilities):

LANGUAGES SPOKEN:

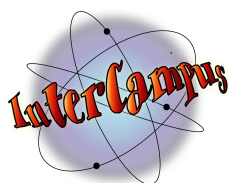
PERSON TO CONTACT IN CASE OF A PROBLEM:

LAST NAME:

FIRST NAME:

TELEPHONE NUMBER:

EMAIL:



2. Exchange conditions :

To be filled in by the host and validated by the guest.

Dates of exchange / number of nights:

Housing address: (please provide a map of the district and city)

Housing type (studio, shared apartment, residence hall, shared house):

Short description of accommodation:

How many people live there?

Guest accommodation: practical conditions (shared room, bed, inflatable mattress):

Is smoking inside allowed: YES/NO

In certain rooms YES/NO

Will the guest have a set of keys? YES/NO

How will the first meeting and journey to the house take place?

Should the guest bring

- bedclothes : YES/NO
- towels : YES/NO

Vehicle :

Both parties declare that the information they have provided is accurate.

By signing this form, they agree to abide by the rules of the exchange. There are three copies of this document: one for the host, one for the guest and one for the Intercampus club.

The host

The guest

The Intercampus club