

QUESTIONNAIRE TORQUAY

SURNAME

NAME

1. PERSONAL DETAILS:

Address

Phone – No.

Email

Date of Birth

Sex (please tick)

☐ M

☐ F

PHOTO

2. FAMILY:

Profession of Father

Profession of Mother

Emergency Contact Address

Course-No.

at

from

to

3. EDUCATION:

Number of school years English

Last Grade

Ability to handle English according to your own estimate:

GOOD ☐

FAIR ☐

BASIC ☐

How would you like your Language Experience course to be?

Do you wish certain topics or exercises to be presented in your classes? If yes, please mention those you would like:

4. MEDICAL:

Do you have certain allergies, handicaps and/or do you have to take any medicines etc.?

5. QUESTIONS CONCERNING HOST-FAMILY:

Do you have special requests (e.g. accommodation with friend/girl-friend, 'single' – accommodation, special host family, etc.)?

Do you agree to stay 'SINGLE' in case the number of participants is odd (please tick)?

☐ YES

☐ NO

How do you imagine your ideal host family?

6. PERSONAL QUESTIONS:

What sports, hobbies etc. do you practise?

How would you describe your character?

7. ADDITIONAL REMARKS/REQUESTS:

IMPORTANT NOTICE:

THIS QUESTIONNAIRE IS THE BASIS FOR THE CAREFUL SELECTION OF YOUR HOST FAMILY ACCORDING TO YOUR INDIVIDUAL WISHES. IT'S PART OF YOUR ENROLMENT.