APPLICATION FOR MEET A LOCAL FAMILY

Reset form

Name: _____

Age: _____ Gender: ☐ Male ☐ Female

Duration of stay in Finland:

from (dd/mo/yyyy) _____ to (dd/mo/yyyy) _____

Do you study ☐ at Lappeenranta University of Technology ☐ at Saimaa University of Applied Sciences

Home town and country: _____

Native language: _____

Other languages: _____

Address in Finland: _____

E-mail address: _____

Telephone number: _____

Do you have any special interests or hobbies?

_____

_____

_____

Any special wishes concerning the family?

_____

_____

_____

Do you have any allergies (e.g. pets, foods)? ☐ Yes ☐ No

Specify: _____

Yes, I have read the Meet a Local Family Guidelines and I agree to follow them.
I allow my contact information to be given to the local family candidate.

Date: _____ Signature: _____

Send your application to the International office of your school.

Lappeenranta University of Technology: tanja.karppinen@lut.fi

Saimaa University of Applied Sciences: ŜØƎŜyƛlɨ·ɸōlɨfōdzǘǎʅlɨèlɨ ƧǎlɨƛƔƛlɨ·ɸŦƛ

Submit form to LUT

Submit form to SAIMIA