FORM FOR HOUSING WITH COSTA RICAN FAMILIES

Name: _____________________________________________

Please complete this form with care. Your answers will help determine your placement with a Costa Rican family. Return completed form to Jeanine Campbell.

1. Would you like to be placed with a family that speaks only Spanish or perhaps with a family that may speak a few words of English?

2. Would you prefer to be integrated into the family's life or left more to yourself?


4. Are you allergic to cats or dogs?

5. Do you smoke? YES  NO

7. Do you have a special diet? Vegetarian?

8. Is there any other information that would be helpful to us in placing you in a homestay?