



Thanksgiving Day HOST FAMILY APPLICATION

Sponsored by International Student & Scholar Services

Last Name _____ First Name _____

Street Address _____

City, State, Zip _____

Day Phone: _____ Evening Phone: _____

Email _____

Do you have pets? _____ If so, what kind? _____

Do you have children? _____ If so, what are their ages? _____

Do you or your family members speak a language other than English? _____ If so, what languages? _____

How many people will be attending dinner (not including international students)? _____

Will the dinner take place at your home or somewhere else? _____

How many students are you willing to host? _____ (We encourage at least 2 students!)

Please return this form by Monday, November 16th. You will be contacted by Friday, November 20th, with information regarding the students you will be hosting.

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