

International Student Application for a Thanksgiving Host Family

First Name _____ Last Name _____

Email _____ Phone _____

Address _____

City, State, Zip Code _____

Gender (Circle one): Male Female

Country of Origin: _____

Degree Program: _____ Field of Study: _____

Do you need transportation? (Circle one) Yes No

List any friends of family members accompanying you to the dinner:

List any specific dietary or other restrictions such as food allergies, pet allergies, vegetarian or religious practices, etc.:

List any particular interests or information that may be useful to your hosts:

Please return form by November 16 to:

Mail: Office of International Student and Scholar Services
 Attention: Austin Powers
 University at Albany, SL G40
 1400 Washington Avenue
 Albany, NY 12222

Email: oioga@uamail.albany.edu

Fax: 518-591-8171

Questions: Please call 518-591-8188