**EUROPEAN SCHOOLS EXCHANGE PROGRAMME**

**PERSONAL INFORMATION SHEET – for ES pupils accepted on exchange at EEB3**

Once your child has been accepted on exchange at EEB3 Ixelles, the APEEE (PA) at EEB3 can start to look for a host family for you. To help us make a suitable match for your child, please fill out the form below and return it with your child’s Letter of Introduction (including photograph from the child, fropm the family, but excluding family name, phone number or other personal data) to[echanges@apeeeb3.be](mailto:echanges@apeeeb3.be). We will let you know as soon as a family is found and put you in touch with them. N.B. The information below will be shared only when a host family is found.

**Child’s Surname and First Names:**

**Date and Place of Birth:**

**Child’s and Parents’ Nationality(ies) (please specify):**

**Current School, Year and Language Section: Class Teacher:**

**Languages studied at school: L1: L2: L3: L4:**

**Language(s) spoken at home:**

**Language(s) preferred for the exchange (spoken in your host family):**

**Names of Parents/Guardian:**

**Profession(s): Mother: Father:**

**Home address of pupil + Tel. no:**

**Mobile Tel. No. (Contact parent): Mother: Father:**

**Email Address (Contact parent): Mother: Father:**

**Skype address (If possible):**

**Brothers and sisters + ages:**

**What are your interests/hobbies?**

**Do you play a musical instrument/sport?**

**Would you prefer to stay in a non-smoking household?**

**Do you mind staying in a family with a pet (dog, cat)? Do you have any allergies to animals?**

**Would you prefer your child to stay in Brussels or outside? No preference?**

**Does your child have any other allergies (dust mites) etc.?**

**Does your child have any special dietary requirements or food intolerances (lactose-free, gluten-free, vegetarian meals etc.)?**

**Does your child have any medical condition that requires regular medical treatment (asthma, epilepsy) or require regular medication that would need to be supervised by your host family?**

**Do you have valid medical insurance for your child when he/she is abroad (e.g. repatriation insurance?)**

**Does your child have an up to date vaccination card?**

**Would you be willing to host a child from EEB3 in return (at the same time or at a later date)? If yes, please return also annex 3.**

**How would you describe your family?**

**Please add a photograph of your son/daughter and/or of your family:**