School Sweden Exchange "ImberB&B" host information form.

Name :	
Address :	
Home tel :	
Mobile no.:	
Please state how many Swedish students you are al	ole to host:
Please state if you prefer male or female visitors:	M
Accommodation available: (please tick appropriate 1 single bedroom 2 single bedrooms	box) 1 twin bedroom 2 twin bedrooms
Other:	
Would the visitor(s)be required to share a room wit	th a member of your family?
If Yes please state with whom:	

Photos of accommodation (Main living room, bathroom and bedroom where Swedish student would be staying): - Photos can be emailed to Miss Singleton.

	Member of household	Relation to Host student	Gender	Occupation
	there regular guests who are like (Grandparents, aunts, uncles e	ely to have significant contact with the transfer.	ne Swedish stud	lent? If so please state
		n, vegan, has a nut allergy or s de clear to you prior to the visit by t		needs can this be
Yes ,	/ No			
Do y	ou have any pets? YES	NO \square		
If YE	S, please give details :			
Plea	se give details of any life style c	noices which influence your family li	fe (eg. vegetaria	anism)
	en a private family vehicle is use en by one of the adults above.	ed to transport the visitor(s) this wi	ll only take plac	e when the vehicle is
Plea	se circle: Yes / No			
		, nor any member of my household ny offences in connection with minor		peing investigated for,
Sign	ed	Date :		