Long term student mobility

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| --- | --- | --- |
| Last name: | |  |
| First name: | |
| Student’s mobile phone: | |
| E-mail address: | |
| Parent’s mobile phone: |  |  |
| Parent’s email address: |  | |
| Level of English: |  | |
| Other languages: |  | |
| SPECIAL OBSERVATIONS | | |
| State of health (specify allergies, medicine etc.): |  | |
| Food allergy: |  | |
| Pet allergy: |  | |
| Other allergy: |  | |
| SPORTS AND HOBBIES | | |
| Sports: |  | |
| Hobbies: |  | |
| Pet(s) at home: |  | |
| OTHER RELEVANT INFORMATION | | |