

## **APPLICATION FOR HOUSING HAWAII**

Family Name:	First Name:		
Date of Birth (month/day/year):	Gender: male	female	
Mailing Address:			
Country of Citizenship:	Housing Move in Date:	Move out Date	
School Attending Now:			
	E-mail:		
		Relationship:	
	Emergency Contact I	Email:	
ABOUT YOU English speaking abili	double) □Residence/Dorm (single) ity (choose your level) 1 = beginner / 1 etails):	10 = advanced:	
Is there any food you can't eat? □Yes (details): □No			
Do you have any health conditions? □Yes ( <u>details):</u> □No			
Do you smoke? □Yes □No	Can you swim? $\square$ Yes $\square$ No $\square$ Yes,	but not well	
Can you live with pets? □Cats OK	□Dogs OK □No pets		
Can you live with children? ☐Yes ☐	]No □No preference		
Is this your first time studying abroad	? □Yes □No		
What are your hobbies?			
Please choose all the sentences that \[ \square \] I am studious	<u> </u>	ndoor activities at home	
☐ I am shy	☐ I prefer o	☐ I prefer outdoor exploring	
☐ I am talkative	☐ I enjoy pl	☐ I enjoy playing sports	
☐ I like my privacy	☐ I am a mo	☐ I am a morning person	
☐ I feel nervous speaking Engl	ish	☐ I like to stay up late	
A few experiences or goals you wish	to accomplish during your time in Haw	vaii:	
Special requests or additional details	about yourself:		
Have you ever been arrested? □Yes	s □No If yes, were you convicted?	□Yes □No	
I(sign	nature) verify that the information on th	nis form is true and correct to the	
best of my knowledge.			