**DATA ABOUT STUDENTS**

Photo

**School year 2018 / 2019**

**32 Language High School**

**“St. Kliment Ohridski” - Sofia**

**Teachers: Irina Andonova, Rosanka Gogova**

**Exchange school:…………………………………………………………………………………………**

**Student’s name………………………………………………………………………………………………………………………….**

**Surname and family name:………………………………………………………………………………………………………..**

**Date of birth:………………………………………………………………………………………………………………………………**

**ID card № …………………………………………………………… Date of issue …………………………………………….**

**Passport №………………………………………………………………… Date of issue…………………………………………**

**Expiry date………………………………………………… Authority …………………………………………………………..**

**Address:…………………………………………………………………………………………………………………………………….**

**Place of birth……………………………………………………………………………………………………………………………..**

**Phone number: ………………………………………………………………………………………………………………………….**

**e-mail: ……………………………………………………………………………………………………………………………………….**

**Facebook profile: ……………………………………………………………………………………………………………………….**

**Other social media profiles: ……………………………………………………………………………………………………..**

**Father / name and surname: ………………………………………………………………………………………………………….**

**Occupation: ……………………………………………………………………………………………………………………………………**

**Phone number: ……………………………………………………………………………………………………………………………..**

**Mother / name and surname: …………………………………………………………………………………………………………**

**Occupation: ……………………………………………………………………………………………………………………………………**

**Phone number: ……………………………………………………………………………………………………………………………..**

**Food allergies: ………………………………………………………………………………………………………………………………..**

**Special food preferences / e.g. vegetarian/ …………………………………………………………………………………….**

**Significant diseases: / e.g. diabetes, heart diseases etc./ Circle the correct option: Yes No**

**State the type of disease: ………………………………………………………………………………………………………**

**Do you need any medical treatment? (Circle the correct option: ) Yes No**

*If the answer is* ***yes*** *state the type of medical treatment you need ……………………………………..*

**…………………………………………………………………………………………………………………………………………………….**

**Are you oppose to be in a house where hosts have pets? Yes No Doesn’t matter**

**Who do you prefer to be your host?**

**Boy Girl Doesn’t matter**

**Your hobbies and preferences: …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**

**I do not like: …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**

**What would you distinguish in your character? .............................................................................................................................................**

**............................................................................................................................................**

**Are there any smokers in your house? Do you smoke? Yes No**

**………………………………………………………………………………………………………………………………….**

**Do you have a pet? Yes No**

**What is it?……………………………………………………………………………………………………………………..**

**What music do you like? ……………………………………………………………………………………………….**

**Do you have bother or sisters living with you? How many? How old are they?**

**…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**

**Your exchange partner will be sleeping in: (circle the correct option)**

**Single room Children’s room**