

TO BE COMPLETED BY STUDENTS



## Skidmore College

Saratoga Springs, New York 12866

Office of Student Academic Services

Starbuck Center

Telephone: (518) 580-8150 Fax: (518) 580-8149

E-Mail: [cjaleel@skidmore.edu](mailto:cjaleel@skidmore.edu)

(information you provide will be shared with your host)

Class Year: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

What should your Friendship Family call you? \_\_\_\_\_

Skidmore E-mail Address: \_\_\_\_\_ Birthday: \_\_\_\_\_

Gender: Male \_\_\_\_ Female \_\_\_\_ Other, Please Specify \_\_\_\_\_

Nationality: \_\_\_\_\_ Country in Which you Reside: \_\_\_\_\_

Dietary Restriction(s)? Foods you don't eat? \_\_\_\_\_

Allergies: \_\_\_\_\_

Return this form to:

The Office of Student Academic Services, Skidmore College  
815 N Broadway, Saratoga Springs, NY 12866, or by email to [cjaleel@skidmore.edu](mailto:cjaleel@skidmore.edu)

Would you like to make your experience in the U.S. more exciting and fulfilling? Become a special member of a local family and have a family away from home? Share your culture, traditions and country with a local family?

Enrich your stay at Skidmore and in Saratoga Springs and help ease your