

Irish Host Family Ltd.
The Business Center
The Island Center
Castleisland
County Kerry



Short Application IHF

Date

Name

Date of birth

Address:

Phone Number

Name of father

Date of birth

Profession

Fathers email address

Name of mother

Maiden name

Date of birth

Profession

Mothers email address

Actual grade at school in home country

Type of school

School year you want to apply for

Length of stay

September-May (9 months) ()

September-December ()

September- February ()

January-May ()

Grade you wish to attend in Ireland

3rd Year ()

Transition Year ()

5th Year ()

6th Year ()

Subject you have to continue during your stay:

Irish Host Family Ltd.
The Business Center
The Island Center
Castleisland
County Kerry

Allergies:

Food intolerance:

Regular medication taken:

Any medical or mental condition that may have an impact on your stay, please describe:

Hobbies:

Please write a few sentences about yourself and why you want to go to Ireland:

Please email this application to: antoinette@irishhostfamily.ie