INTERNATIONAL FRIENDSHIP PROGRAM
OFFICE OF INTERNATIONAL SERVICES - NC STATE
INTERNATIONAL STUDENT/SCHOLAR APPLICATION

Please answer neatly and COMPLETELY. Applications must be signed and dated.

NAME: FAMILY NAME FIRST/GIVEN NAME	HOME COUNTRY	MALE / FEMALE ☐ MALE ☐ FEMALE
ARRIVAL DATE IN U.S.	RETURN DATE TO YOUR COUNTRY	BIRTH DATE: MONTH DAY YEAR
MARITAL STATUS: SINGLE / MARRIED	RELIGION (OPTIONAL)	AGE
STATUS AT NC STATE: ☐ GRADUATE STUDENT ☐ UNDERGRADUATE ☐ RESEARCH SCHOLAR / PROFESSOR ☐ SPOUSE	LANGUAGES YOU SPEAK	ENGLISH LANGUAGE PROFICIENCY: ☐ NATIVE ☐ FLUENT ☐ GOOD ☐ FAIR ☐ POOR
FIELD OF STUDY / RESEARCH	DO YOU SMOKE? ☐ YES ☐ NO	FIRST TIME IN FRIENDSHIP PROGRAM? ☐ YES ☐ NO

FOODS YOU CANNOT EAT	ANY ALLERGIES?

WHY DO YOU WANT TO PARTICIPATE IN THE INTERNATIONAL FRIENDSHIP PROGRAM?

PLEASE TELL ABOUT YOURSELF: YOUR INTERESTS, HOBBIES (WHAT YOU DO IN YOUR FREE TIME), GOALS, TRAVEL EXPERIENCE, ETC. **BE SPECIFIC** AND LIST AS MUCH AS POSSIBLE. ***THIS INFORMATION WILL HELP IN MATCHING YOU WITH AN AMERICAN FRIEND!!***

IF MARRIED, WILL YOUR SPOUSE BE WITH YOU IN THE US? ☐ YES ☐ NO WILL YOUR SPOUSE BE PARTICIPATING IN THE FRIENDSHIP PROGRAM WITH YOU? ☐ YES ☐ NO	NAMES, GENDER, AND AGES OF CHILDREN
SPOUSE'S NAME: LAST/FAMILY NAME FIRST/GIVEN NAME	WHAT IS YOUR SPOUSE'S ARRIVAL DATE?

RALEIGH ADDRESS (Include Street, Apt. #, City and Zip Code)

RALEIGH PHONE: (DAY) (EVENING)	RALEIGH EMAIL

ADDRESS IN HOME COUNTRY

PLEASE READ CAREFULLY: Yes, I want to become friends with someone through the International Friendship program. I understand that my responsibilities include attending an orientation session, returning phone calls, emails, etc. from my friends and inviting my friend to various activities, attend social activities sponsored by the International Friendship Program, and completing an evaluation at the end of the year. I also understand that friendship partners can be all ages from students to senior citizens and include Americans as well as persons from other countries who have lived in the US a long time. Friends may be single persons (please note that single persons will be matched with persons of the same sex), couples, and families. I understand that if I am uncomfortable or unhappy in my friendship, I can call the OIS to request a different assignment at any time. I will respect the values, customs and religions of my American friend.

Signed: ***Today's Date:***

PLEASE COMPLETE AND RETURN TO: OIS/IFP, NC STATE UNIVERSITY, 320 DANIELS HALL, BOX 7222, RALEIGH, NC 27695-7222
OR FAX TO: (919) 515-1402 OR CALL: (919) 515-2961, IFYOU HAVE ANY QUESTIONS
Check out the other international programs at OIS! www.ncsu.edu/ois/programs

For Office Use Only:

DATE RECEIVED:	DATE MATCHED:	ORIENTATION:
DATABASE ENTERED:	AMERICAN FRIEND:	PHONE: