

STUDENT INFORMATION SHEET

Common Culture Code Project

BUDAPEST MOBILITY (02-08.03.2025) – PIASECZNO MOBILITY (30.03-05.04.2025)

The following information will be forwarded to the project coordinator of the Hungarian and Polish school and host families

Name, Surname	
Gender	
Date of birth	
Address	
Student's Phone Number	
Student's Email	
Parents' Name	
Parents' Phone Number	
Parents Email	
Special treatment for health reasons (medication, allergies, etc.)	
Other info (hobbies, field of interest, anything that I find important to tell about myself)	
This is what I like to eat and what I don't like to eat:	
Siblings? boy/girl, what is his/her age	
Domestic animals? What type?	
What languages do you speak?	
What languages do your parents speak?	
Non-smoking household:	yes <input type="checkbox"/> no <input type="checkbox"/>
Guest-room available?	yes <input type="checkbox"/> no <input type="checkbox"/>