

# QUESTIONNAIRE FOR INTERNATIONAL STUDENTS

## Mercy College Entry

Name ..... Home University .....

Major ..... Dorm Room Number (if it is pre-arranged) .....

This questionnaire is to help you to stay more comfortably and safely. Your response does not affect your status as an exchange student. Please respond to the following questions frankly. We will not reveal your personal matters to others.

1. Are there any types of food you do not eat? (*pork, chicken, dairy product, etc.*)
2. Do you have any allergy or illness we should know?
3. Do you have any medicine you should take while staying in New York?
4. Do you have any valuable belongings that you must ask us to keep safe for you?
5. Do you have any relatives or friends in New York? (If yes, please provide the person's information.)

Name		
Phone Number	(Home)	(Work)
Address		
Name		
Phone Number	(Home)	(Work)
Address		

6. Is there anything that we should know about you? .....