

Conversation Partner Application

I. Personal Information

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work/Cell _____

E-Mail (print clearly) _____

Age ___ Gender ___ 1st Language _____

Other Languages _____

You are _____ an international student from _____
_____ a UTSA student _____ Major: _____
_____ Other: _____

Do you speak English fluently (as a native)? Yes No

Interests/Hobbies _____

II. Partner Preferences

Do you smoke? Yes No

Is it OK if your partner smokes? Yes No

Would you be willing to meet multiple partners? Yes No
(As a group or individually)

Is there anything else you wish us to consider when matching you with a partner?

Please return this form to:
Office of ESL Services, MS 3.02.05
The University of Texas at San Antonio
One UTSA Circle
San Antonio, TX 78249-0653
Phone (210) 458-7898
Fax (210) 458-7679