# HOSTING PLAN

## INTERNATIONAL EXCHANGE PROGRAM

|  |  |
| --- | --- |
| **Student's full name** |  |
| **Date of possible entry into Ecuador** |  |
| **Date of possible departure from Ecuador** |  |

Mark with an "x" the hosting option you have selected:

( ) **Host Family** (UIDE Program)

We will put you in contact with the family so that you can get to know each other prior to your arrival.

( ) **Student residences at UIDE**

We will contact you to select your room type, according to availability.

( ) **Self-chosen location**

If you have selected the "self-location" option, you must follow the recommendations of the UIDE regarding safe sectors and close to the transportation routes. Please provide the following information regarding the location you have found.

|  |  |
| --- | --- |
| Complete address | Street/Avenues, Numbering and Sector/Neighborhood |
| GPS location link or location capture |  |

As responsible for the information provided, the student signs:

|  |  |
| --- | --- |
|  | dd/mm/yy |
| Signature | Date |