## International Student Fellowship Cleveland, OH Services Request Form

Fields marked with an asterisk (\*) are required. Your requests will not be processed until we receive all (\*) information

*Name :		*Gender:
*Email :		Case Email:
*Will you be travelling alone? Yes	No	(Each student needs a filled out application)
* If no, names of others ariving with you	ı <b>:</b>	(Each student needs a fined out appread on)
Hometown city, state and country:		
lternate contact information in case we are Name and contact other than applicant)		le to reach you on your journey:
Name of Department at CASE:		
☐ Other (Please Specify):		Certificate/Diploma   Research Scholar  ork:
*Arrival Information		
First USA Airport :		*Cleveland Hopkins International Airport
Arrival Date :		*Arrival Date :
Flight Number:		*Flight Number:
Arrival time :		*Arrival Time :
How can we help? Please check all that you Airport Pickup Only Temporary Ho irport pickup only, what address will you	ousing	Only Airport Pickup & Temporary Housing
o you have any special needs we should be	aware	of? If yes, please explain:
	ve you	port pickup and temporary housing procedure0 better in making your relocation to Cleveland OH a ain.html
***We also organize many fun activities thro	_	•