

HOMESTAY APPLICATION FORM



Homestay Details:			
Mothers Name:	Occupation:	Interests:	D.O.B:
Fathers Name:	Occupation:	Interests:	D.O.B:
Dependent Children:	Attending School / University	Interests:	D.O.B:
Other International Students	Attending School	Country of Origin	D.O.B
Host Mother Email:		Host Father Email:	
Address:			
Host Mother Mobile:		Host Father Mobile:	
Home Phone Number:			
First language Spoken at Home:		Ethnicity of Homestay Family:	
Experience Hosting International Students:		Are there any family members who smoke?	
Pets:			
Please explain if your family follow any special dietary regime (eg vegetarian, vegan etc)			
Family Information: Please tell us about your family interests, what your family would do during a typical weekend etc.			
Family Profile: Please write a brief paragraph describing your family and your home environment. This enables our students to know some information about your family before she arrives at your home.			
Medical Information: Do any members of your family have an existing medical condition that our international student should know about? If so, please explain? If it is too sensitive please feel free to talk with our International Student Services Manager Ph:486- 1132 Ext 715			

Student/Homestay Travel & Airport Expectations:

With all our host families we expect you to meet and farewell your student at Auckland International Airport or meet at Carmel College. Will this be possible for you?

Yes or No

House Details:

Please give us a brief description of your home, how many bedrooms do you have available for students and will student/s have their own bathroom?

Transport:

Is your home on a public bus route or school bus route?

If yes please include what number bus and where are the closest stops from your home and Carmel College.

If you are unsure please check at.govt.nz and include on application.

Please include four photos 1) Family Members 2) Student Bedroom 3) Student Bathroom 4) Exterior of Home

Are you available to pick your student up from school if she is unwell?

Yes No

If you are successful Carmel College will require your bank account name and details for payments, if you are happy to give this now please complete or we can get this at a later date.

Account Holder Name:

Account Number:

Do you give consent for Carmel College to use your photos in our homestay booklets and other promotional material?

Yes No

Referees:

Please nominate two referees who can provide information on your suitability to care for an international student in your home. If you have provided residential care before, the person or organisation who employed you in that situation should be one of your referees.

Name:

Occupation.....

Phone:

Email:

Name:

Occupation:

Phone:

Email:

Declaration:

1. We will not leave our homestay student at home on her own overnight. (A female adult must always be present in the home)
2. We will inform Carmel College immediately of any changes to the homestay situation.
3. We will inform Carmel College as soon as any problem or concern arises.
4. We will inform Carmel College of any change of holiday arrangements as soon as possible.
5. We understand that NZQA Code of Practice requires all persons living or staying in home over the age of 18 years undergo a New Zealand Police Vet Check.
6. We will not leave our international student in the home without reasonable provision being made for supervision and care dependent on age.

We have read & understood all of the above declaration

Host Mothers Signature: Date.....

Host Fathers Signature:..... Date.....