

HOMESTAY APPLICATION FORM

Primary Caregiver's Name Last Name: First Name:		Secondary Last Name: First Name:						
Date of birth:		Date of birth:						
Address:			···					
Phone Numbers		T						
Home:								
Mobile:		Mobile:						
Work Number:		Work Number:						
Email address:		Email address:						
Occupation:	cupation:			Occupation:				
Bank Account: (For homestay payments)								
Family profile:								
Total number of household members								
Complete these details for each person living in	the ho	ome:						
Family Members:	DOB		M/F	Attending School/University				
Other International Students & Ethnicity:	DC	OB .	M/F	Attending School/University				
Please write a brief paragraph describing your fa				ment. This enables our students to				
have some information about your family before	e sne ai	rrives at you	r nome:					

Family Interests:										
☐ Animals	☐ Cricket			☐ Hockey		Rowing		☐ Table Tennis		
☐ Athletics	☐ Cycling			☐ Horse Riding		Rugby			Tennis	
☐ Badminton	☐ Dance			☐ Volleyball		☐ Sa	☐ Sailing			Theatre
☐ Basketball	☐ Family Outings			☐ Mountain Biking		Skateboard			Touch Rugby	
Beaches	☐ Fencing			Movies		Skiing			Trampoline	
☐ Board Games	☐ Fishing			☐ Netball [☐ Sı	☐ Snow Boarding			Travel
☐ Sports	☐ Garde	ening		Outdoors	□Soco		ccer			Swimming
☐ Church	☐ Golf			Reading		Squash				Walking
☐ Computers	☐ Gymn	☐ Gymnastics		Rock Climb	oing	SUP				Water polo
☐ Cooking	☐ Hiking			Rollerbladi	ng	□Surfing			Water Sports	
Your Home Facilities: Please provide brief details about your home and the bedroom you intend to provide for a student. Please note, we do not allow students to share a room, except for some short-stay group tours.										
☐ Pool ☐ Near Beaches				☐ Near Shops			S			
☐ Garden ☐ □			Воа	Boat			Piano			
☐ Wifi – Unlimited Fibre ☐ S		Spa	Spa Pool			☐ Holiday Home				
☐ Wifi Other ☐ Ta			Tal	Table Tennis			☐ Trampoline			
☐ Pool table ☐		Ens	Ensuite for student			☐ Other				
Transport to School:	Advise how	your stude	nt v	vill get to and	I from so	hool				
☐ Walking		Approx Mins	☐ By Bus			Bus No.			Aprox Mins	
☐ By Car		Approx Mins								
Pets – Please list all pets										
Diet – Do you have a special diet? e.g. Gluten free										
Would you accept a student with a special diet?										
Total number of bedrooms in your home?										
Total number of bedrooms for students Number of Bathrooms in your home										
Religion – Churchgoer Yes/No										
Main language spoken in home?										
Second language spoken in home?										
Do members of your home smoke?										

Does either host parents go away overnight or weekends?	for					
Do both caregivers have a full driver's license?						
We ask our host families to meet and farewell the	neir					
students at the airport. Is this possible for you?						
Do you give consent for the school to use your photo						
our homestay booklets and other promotional materia						
Can you pick your student up from school if she is unw						
Does any family member have a medical condition the						
Please give details or if this is too sensitive, please talk to our International Department.						
	y with you who you have not mentioned above? Please					
provide details:						
Reasons for offering homestay accommodation:						
Reasons for offering nomestay accommodation.						
Do you wish to host any particular nationality?						
To you mon to need any particular number and y						
Any other comments or requests?						
,						
Experience Hosting International Students:						
Details of an emergency contact outside of your house						
Full Name:	Relationship:					
Address:	Email Address:					

PART 2 - ADDITIONAL ATTACHMENTS

Photos – We require 3 photos (.jpeg or .png file) which will also be held on file and sent, as part of your family profile, to a new student.

Mobile No:

- 1. The outside of your home
- 2. The student's bedroom
- 3. Your family members

Home No:

Covid-19 — We require a copy of the vaccination certificate/passport for all people over the age of 12 living in the homestay.

Send digital copies as an attachment to: international@carmel.school.nz

Referees

Please nominate two referees who can provide information on your suitability to care for an international					
•	e. If you have provided residential care before, the person or organisation who employed				
you in that situation s	should be one of your referees.				
Name:					
Occupation:					
Phone:					
Email:					
Name:					
Occupation:					
Phone:					
Email:					

TERMS AND CONDITIONS

Thank you for offering to become a homestay for International students attending Carmel College and taking the time to complete the A;;ication Form. As part of this application process, please read the 'Guidelines for Hosting and International Student' and sign our 'Homestay Carer Agreement' and carefully read the terms and conditions it contains.

I/we acknowledge that the information provided above is true and correct.					
Name:	Signature:	Date:			

A few points to note before submitting your forms:

- Every person living in your home (or someone who regularly stays overnight in your home) who is 18 years of age or over must submit a police vetting form
- Being a homestay family should not be relied upon as a constant source of income. Students come for short or long stays and when one leaves we may not be able to place a student with you again immediately.
- Homestay payments should be considered more of a reimbursement for costs associated with having an additional person in your family rather than an additional source of income.
- We are generally only able to accept homestay families who are within a few bus stages of our school. This is because students like to be able to easily get to and from school and to meet their friends at weekends and after school.
- Our peak demand periods for homestay families are: late January and July/ August