

Primary Caregiver's Name

Last Name:

First Name:



APPLICATION TO BE A HOMESTAY FAMILY

Please complete all sections of this form

Last Name:

First Name:

Secondary Caregiver's Name

Date of birth:	Date of I	oirtn:				
Address:	<u>, </u>					
Phone Numbers						
Home:						
Mobile:	Mobile:					
Work Number:	Work N	Work Number:				
Email address:	Email ac	Email address: Occupation:				
Occupation:	Occupat					
Employer:	Employe	Employer:				
Bank Account: (For homestay payments)						
Family profile: Total number of household members						
Complete these details for each person liv	ving in the home					
Name:	DOB	M/F	Relationship to Hosts			

Preferred Placements – Please tick the appropriate boxes										
☐ 1 student	☐ 13 y		13 yea	ears		☐ Male only		☐ 1-2 Terms		
☐ 2 students ☐		☐ :] 14/15 years		☐ Female Only		2-3 Terms			
☐ 3 students ☐ 1		16/17	6/17/18 years					☐ 4 Terms +		
☐ Age - no		no Pr	o Preference		☐ Gr		☐ Gr	oups		
Family Interests:										
Animals		ricket			☐ Hockey		☐ Rowing			☐ Table Tennis
☐ Athletics		cycling	g		☐ Horse Riding		Rugby			☐ Tennis
☐ Badminton	☐ Dance			☐ Lawn Bowls		☐ Sailing			☐ Theatre	
☐ Basketball	Family Outings			☐ Mountain Biking		Skateboard		nrd	☐ Touch Rugby	
☐ Beaches	☐ Fencing			☐ Movies		☐ Skiing			☐ Trampoline	
☐ Board Games	Fishing			☐ Netba	Netball		☐ Snow Boarding		☐ Travel	
☐ Cars	☐ Gardening			Outdoors		□Soccer			□ т∨	
☐ Chess	☐ Go-Carts			☐ Photography		☐ Sports			☐ Volleyball	
☐ Church	☐ Golf			Reading		□Squash			□ Walking	
☐ Computers	☐ Gymnastics			☐ Rock Climbing		☐ SUP			☐ Water polo	
☐ Cooking	☐ Hiking			☐ Rollerblading		Surfing			☐ Water Sports	
						☐ Swimming		ıg	☐ Other	
Your Home Facilities: Please provide brief d note, we do not allow										tudent. Please
☐ Pool ☐			☐ Near Beaches			☐ Near Shops		S		
☐ Garden ☐		□ E	Boat		☐ Piano					
☐ Wifi – Unlimited Fibre ☐ broadband		□s	Spa Pool		☐ Holiday Home					
☐ Wifi Other ☐		□ 1	Table Tennis		☐ Trampoline					
☐ Pool table ☐			Bicycle for student use		Other					
Transport to School: a	advise h	now yo	our st	udent	will get to	and from sch	nool			
□ Walking			Mins		□ ву	☐ By Bus Bus No. Mins			Mins	
		Mins		Approx cost of bus per trip: \$						

Pets – Please list all pets	
Are these pets indoors or outdoors?	
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	
Study facilities for student, eg desk in room	
Number of Bathrooms in your home	
Religion – Churchgoer Yes/No	
Main language spoken in home? Second language spok	ken in home?
Do members of your home smoke?	
Does either host parents go away overnight or for wee	ekends?
Do both caregivers have a full driver's license?	
Does any family member have a medical condition the	student
should know about? Give details	
Do you have any relatives/friends who sometimes st	tay with you
who you have not mentioned above? Provide details	
Reasons for offering homestay accommodation	
Do you wish to host any particular nationality?	
Any other comments or requests?	
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Details of an emergency contact outside of your house	
Details of an emergency contact outside of your house Full Name:	chold: Relationship:
Full Name:	Relationship:
Full Name: Address:	Relationship: Email Address:
Full Name:	Relationship:
Full Name: Address:	Relationship: Email Address:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:
Full Name: Address: Home No:	Relationship: Email Address: Mobile No:

PART 2

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.

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

Send digital copies as an attachment to: tania.garcia-mcentire@howick.school.nz

TERMS AND CONDITIONS

Thank you for offering to become a homestay for International students attending Howick College. As part of this application process, please sign the attached 'Homestay Carer Agreement' and carefully read the terms and conditions it contains.

I/We acknowled	ge that the above information is true and correct
Signature – Hom	estay caregiver(s):
Printed Name:	
Date:	

Thank you for taking the time to complete the Application Form

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 Howick College school zone. 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.

PLEASE USE THE CHECKLIST ON THE FOLLOWING PAGE TO ENSURE YOU HAVE NOT FORGOTTEN ANYTHING



HOMESTAY APPLICATION CHECKLIST

Please check that you have completed all forms and processes listed below before submitting your application:

Application to be a Homestay form filled in and signed
3 Photos provided to the school in electronic format
Homestay Carer Agreement read, understood and signed
Referee Forms provided to referees (at least 1 for each caregiver)
Police Vetting forms filled in for each family member 18 or over
2 Forms of ID (one photographic) for each family member 18 or over Shown to school staff
Homestay Family Guidebook has been read and understood

Please note: Once all paperwork has been received by the school, and all procedures completed, if we consider you suitable to host a student, we will contact you to arrange a home visit and interview. We require both caregivers to be present at the interview.



HOWICK COLLEGE HOMESTAY REFEREE CHECK

(Please supply this form to at least 1 referee for each caregiver and ask them to return it directly to the school (See details at end of form)

Confidential

This form is to help us in the assessment of an applicant's suitability to provide homestay care for an international student attending Howick College.

The information you provide is strictly confidential.

Thank you for taking the time to complete the form. We appreciate your honest response to the questions below.

Name of Applicant Name of Referee Referee's email Mobile phone Relationship to Applicant (eg. friend, workmate, associate, employer) How long have you known the Applicant? Do you consider the Applicant to be a suitable person to care for an international student?

Please comment on the following:

	The suitability of the applicant to care for international students. Please consider attitudes to other cultures, motivation, knowledge, sk emotional and psychological stability and strength, role modelling.
_	emotional and psychological stability and strength, fole modelling.
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	The suitability of the home. Please consider other family members and the appropriateness of the physical and emotional conditions in the home.
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If you have any comments or would like to contact the school directly please contact

Thank you for completing this form. Please return to:

Tania Garcia-McEntire

International Department Howick College Sandspit Road

Phone: 534 4492 Ext. 890

e-mail: tania.garcia-mcentire@howick.school.nz