

please fill in and send

- Section A must be completed in English, please print.
- Please answer all questions as fully as possible.
- Please attach one photograph to the top of this page.

section A

Homestay Application

Student's family name: _____

Student's first names: _____

Preferred name: _____

Nationality: _____ Male / Female: _____

Date of birth: _____ Age: _____

Father: _____ Occupation: _____

Mother: _____ Occupation: _____

Home Country Address:

Street: _____

Suburb: _____

City: _____ State: _____

Country: _____ Zip Code: _____

Telephone: _____ Fax: _____

Email: _____ Cell Phone: _____

Expected date of arrival in New Zealand: _____

Personal Information

Your home environment:
How many people live in your household? _____

Give a brief description of your family _____

Do you have a set curfew? YES / NO If yes, what time? _____

What household tasks do you undertake regularly? _____

Do you have your own bedroom? YES / NO

Are you responsible for keeping your room tidy and clean? YES / NO

How important is it for you to have regular contact with your parents/family?

Do you have any pets at home and what type? _____

Do you have a religious affiliation? YES / NO

If yes, please state _____

Would you like to attend religious services regularly? YES / NO

Contribution to host family:

What positive contribution can you bring to your host family? _____

Would you feel comfortable in a home with small children? YES / NO

Would you prefer someone of your own age within the host family? YES / NO

Are you prepared to discuss problems openly with your host family and accept their "house rules"?
YES / NO

What do you expect from your host family? _____

Interests and hobbies:

List any sport that you are interested in: _____

List any hobbies that you are interested in e.g. music, reading: _____

What activities do you and your family do together in your free time? _____

HEALTH AND MEDICAL INFORMATION:

Do you have special requirements because of allergies, religious or self-imposed beliefs,

e.g. vegetarian? YES / NO

Please give details: _____

Do you smoke: YES / NO

(please remember that smoking is not permitted at Middleton Grange)

Do you suffer from ailments e.g. asthma, diabetes? YES / NO

Please give details: _____

Please list any other illnesses that you suffer from: _____

NOTE: All Homestay members 18 years and over have passed a police vet.

section B

PLEASE COMPLETE ALL DETAILS IN THIS SECTION

Middleton Grange School is responsible for all students who have a student study visa made out to Middleton Grange. To help in the supervision of students we have a small group of Care Providers and Accommodation Agents to help us. These people have a contract with the school. A student cannot choose their own Care Provider and Accommodation Agent.

APPOINTMENT OF CARE PROVIDER AND ACCOMMODATION AGENT (CP & AA)

- All students must have a Middleton Grange School "contracted" CP and AA
- All CP's and AA's must have permanent residence and NZ Citizenship
- All CP's and AA's must have a Middleton Grange CP and AA Idemnity document signed by the students parents
- All CP's and AA's must undergo appraisal against the Code of Practice for the Pastoral Care of International Students, ("the Code")
- All CP's and AA's must support the special character of the school.
- All CP's and AA's must ensure that all students regardless of age, abide by the Code for students under the age of 18 years.

We appoint _____ as CP and AA
(Family Name) (Given Names)

_____ address

_____ home phone _____ work phone

_____ cell phone _____ email

We have read the Appointment of Care Provider and Accommodation Agent – Background Information. In signing this form we understand that we will not hold the school responsible for activities that occur outside school hours.

Parent's Signature: _____ Date: _____

Student's Signature: _____ Date: _____

Care Provider's Signature: _____ Date: _____