

Christchurch Boys' High School

Homestay Family Application Form

Phone (home):		Wo	rk:	
Cell phone:	En	nail:		
Please list all persons living in y	our hous	se (including a	onlicant):	
Name	M/F	DOB	Occupation or School	
Is everyone in the household aw	are you	are applying to	be a host family?	Yes / No
Is there anyone over the age of holds a key? (If yes, they will nee				ys overnight regularly and
Total number of bedrooms:	Nur	nber of spare b	pedrooms: Num	ber of bathrooms:
Facilities				
WiFi	Ow	n Bathroom		Computer
Study Area	Bike	е		Own TV
Other:				
Pets: Yes / No Details:				
·				
Does anyone smoke? Yes / No				
Languages spoken at home:				

Preferred Natio	onality:			
		students before? Ye		
•				
Details	•••••			
Details of hous	e and student's	bedroom:		
Student metho	ds of transport	to/from school		
Walking distance	ce Yes / No	Duration/route:		
Bike	Yes / No	Duration/route:		
Bus	Yes / No	Duration/route:		
Homestay Vehi	cle Yes / No	Duration/route:		
Family Interest				
Health Declara	tion			
knowledge, me interfere with	embers of my ho providing a goo	usehold and immedind standard of care	iate family do not for an internation	nt) testify that to the best of my have health complaints that could al student residing in our home. ational staff at Christchurch Boys'
Bank account o	letails			
Bank I	Branch A	ccount number	Suffix	
Signed:				Date:

Homestay Preferences