

## **HOMESTAY STUDENT APPLICATION FORM**

To provide you with a high level of pastoral care and place you in an adequate homestay please provide us with the following information (tick the appropriate boxes, write clearly and give as much detail as possible)

**Student Information** 

Make sure you answer all the questions

First Name:			Last Name:		
			Male/Female/		
Preferred Name:			Other Gender:		
Date of Birth:			Nationality:		
Age:			Primary Language:		
Home Address:					
City:			Country:		
Phone Number:			Mobile Number:		
E-mail address:					
Enrolled Programme of Study:					
Term Enrolled:					
I require home stay accommodation from to					
NB: Homestay accommodation is at an additional cost to the course fees and strongly recommend homestay for all students for the first 9 weeks.					
See Website <a href="https://visioncollege.ac.nz/study/agriculture/nz-certificate-in-primary-industry-skills-2/">https://visioncollege.ac.nz/study/agriculture/nz-certificate-in-primary-industry-skills-2/</a>					
Payment is required in advance.					
Emergency Contact Person					
Full Name:					
Address:					
Phone Number:					
E-mail Address:					
Relationship:					
Language:					
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## **Medical Information** Do you have any health conditions (e.g. asthma, epilepsy, diabetes, etc)? No Yes If yes, please specify Do you have any allergies (e.g. penicillin, bees, cats, shellfish, nuts, etc)? No Yes If yes, please specify Are you currently taking any medication? No Yes If yes, please specify Have you had any major injuries or illnesses in the last 3 months? No Yes If yes, please specify **PERSONAL OVERVIEW** Please answer all truthfully to assist with appropriate homestay placement Are you married: Have you been overseas before: □ No □ Yes □ No ☐ Yes Number of Children \_\_\_\_\_ If yes, where? \_\_\_\_\_ English Level: ☐ Pre-Intermediate ☐ Intermediate □ Advanced □ Beginner □ Elementary Any other languages spoken or understood? Do you drink alcohol? Do you smoke Cigarettes or Vape? □ No □ Occasionally □ Yes □ Occasionally □ No ☐ Yes Are you comfortable living in a home with: ☐ Children □ Pets Please elaborate if needed: Are you comfortable sharing a room with another student/classmate: □No ☐ Yes Please elaborate if needed: \_\_\_\_\_ Do you have special dietary requirements? (For example: diabetes, vegetarian, vegan, gluten intolerant, halal) □ No ☐ Yes If yes, please provide details: \_\_\_\_\_

□ No

☐ Yes

Do you have any special needs?

If yes, please provide details: \_\_\_\_\_

## Personality Reserved Outgoing Please select the statement which best describes you: ☐ I am quiet and prefer mainly staying at home and around the house in my spare time. ☐ I am active and prefer mainly going out and doing things away from home in my spare time. ☐ I enjoy spending time both at home and going out. Please select the statement which applies to you: ☐ I am guite independent and don't want to rely on the host family too much. ☐ I would prefer a family who would involve me in their day-to-day activities, who would look after me and who I could get to know well. ☐ I like to be independent and do my own thing at times but also want to spend time with the host family, partaking in family activities. On weekends/days off, do you like to: Sleep in □ Get up early □ Stay Home Go out □ Other: After School, do you want to: Rest 🗌 Study 🗌 Stay Home Go out Other: Please tell us a bit about yourself and what is important to you: Please tell us what interests you: For example: What do you enjoy doing (e.g. hobbies, cooking, reading, watching movies, any specific sports, exercise, hiking, camping, travel, nature, explore various destinations, etc) Anything additional you would like to bring under our attention or highlight?

## **ACKNOWLEDGEMENT**

You agree and acknowledge that:

- a) you have provided all information as required in this form, or as subsequently requested by us, and that the information is true and correct.
- b) you will provide any further information we may ask for which is reasonably required by us for our homestay enrolment process.
- the information you have provided in this form (including any additional information provided by you or collected by us) will be collected, used, stored, and shared by us for our purposes as set out in the Privacy Statement; and
- d) you are 18 years of age or over

Name and Surname:	
Signature:	
Date:	

Please note: We do our best to meet your needs, but this is not always possible.