HOMESTAY APPLICATION

Please read the questions carefully and answer every question. Return completed form to:

International Student Coordinator
Mill Park Secondary College
Civic Drive Epping 3076

SECTION A	PERSONAL DETAILS				
I / we (1)		and (2)			
	come homestay providers.	()			
Person 1 I ha	son 1 I have a 'Working With Children Check '		Card Number:		
Family name:		Given Names:			
Date of birth:	//	Gender :	 М	□F	
Country of birth if not loccupation: Address:	born in Australia:				
Email address:					
Home Phone:	Mobile:	Work:	F	ax:	
Person 2 I ha	ave a 'Working With Children Check'	Yes / No	Card Numbe	er::	
Family name:		Given Names:			
Family name:	/	Given Names:	M	□F	
Date of birth:		Gender :	М		
Date of birth:	//	Gender :	М		
Date of birth: Country of birth if not	//	Gender :	М		
Date of birth: Country of birth if not l Occupation:	//	Gender :	М		

SECTION B **FAMILY PROFILE**

Please list the names of all people	residing in the	home		
Name	Gender	Age	Relationship to main care giver	Occupation
Please provide a brief profile of yo	ur family inclu	ding family	activities, interests and hobbies:	
Do you or any members of your far	mily smoke?		Yes	No 🗔
Do you have any pets			Yes	No 🔲
If yes, please specify:				
ls there any food you do not eat or	cook?			
Main Language spoken at home: _			Other languages spoken:	
Is there anything else you'd like to				

SECTION C	ACCOMMODAT	ION DETAILS			
T ()			□ Owned	or ron	tod
Type of residence:	House Unit	L Flat		OI I C II	ieu
Briefly describe the resid	ence (e.g. No. of bedroo	ms, living space e	tc)		
Do you expect to be living	in your residence for the	next 12 months?	Yes		No 🗔
Please describe the bedro	om and furniture availab	le for the student:			
Date when accommodatio	ın is available:		<i>1</i> 1		
Have you previously hoste	ed international students	?	Yes		No 🔲
If yes, please give details	:				
How far is the nearest mod	de of public transport fro	m your home?			
Bus: minute	es Train	: n	ninutes	Tram:	minutes
Please specify transport s	tudent will use to and fro	m school.:			
What arrangements will yo	ou offer with the provision	of meals?			
Breakfast:					
Lunch:					
Dinner:					
Snacks:					
Do you have any preferen	ce regarding gender of the	ne student?			
Is there anything else you	d like to add:				
			· · · · · · · · · · · · · · · · · · ·		

SECTION D	EXPERIENCE	
Why do you want to l	pe a homestay provider?	
Please outline any rel	evant experience you have ha	ad:
a. with young people	e in general. b. Young p	eople from other countries c. With providing homestay
APPLICANT'S SIGN.	ATUREs	
Person 1:		Date:
Person 2:		Date:
SECTION E	REFEREES	
Please nominate at le	ast two referees you have kno	own for at least two years. This cannot be a family member.
Name:		
Phone:		
Your Relatio	nship to this person	
Name:		
Phone:		
Your Relatio	nship to this person	
Name:		
Phone:		
Your Relatio	nship to this person	