

HOST FAMILY APPLICATION FORM

n your family)		
Father's nam	e:	Mother's name:
		Suburb:
State:	Postcode:	Phone:
Mobile No:		Age:
Mobile No:		Age:
	h- 23 rd March 202! n your family) Father's nam State: Victoria Mobile No:	State: Postcode: Victoria Mobile No:

CHILDREN:

Name	Age	Sex	Living at home	Interests or occupation	
How will the student o	ommut	te to ar	nd from school each	ı day?	
□Car □Bus □Train □Bicycle □Walking □Other:					
Approximate travelling time: Cost to student for public transport: daily					
Do you have any other persons living with the family? \square Yes \square No					
If yes, please specify:					
Will the student have his/her own room? \square Yes \square No					
If no, with whom will he/she share?					
Do any of your family members smoke? ☐Yes ☐No ☐Indoor ☐Outdoor					
Do you have any family pets? Please indicate type of pet and whether they are kept indoors or outdoors.					
Are there any health c		-		ments or any other condition existing in the	
Do you prefer to host: ☐Male ☐Female ☐Either					
bo you prefer to nost. Entitle Elettier					
Host Family Agreeme	nt:				
l,				ay name), agree to host a student from	
Shibuya JHS and will p	rovide	the foll	owing:		
-Provide a supportive	and inc	lusive f	amily environment		
-3 Meals per day (Brea	ıkfast/L	unch/[Dinner)		
-A bed, appropriate be	edding	accordi	ng to the weather,	towel, and secure bathroom facilities	
-Full support to the vis	siting st	udent/	school/program as	required.	
Homestay Name:	omestay Name: Signature:				
Date:					