

HOST FAMILY APPLICATION FORM

GROUP NAME Shibuya Junior High School						
AUSTRALIAN SCHOOL: Nazareth College						
PROGRAM DATES: Thursday 7 th – Tuesday 19 th March 2019						
JAPANESE STUDENT NAME: (A student will be placed with your family)						
HOST FAMILY:						
Family name:			Father's name:			Mother's name:
Address:						Suburb:
City/Town Melbourne			State: Victoria		tcode:	Phone:
Father's occupation:			Mobile No:			Age:
Mother's occupation:			Mobile No:			Age:
Family email addre	ess:				The state of the s	
CHILDREN			-			
Name	Age	Sex	Living at home		Interests or occupation	
Do you have any other persons living with the family? If so, please specify.						
Will the student have his/her own room? If no, with whom will he/she share?						
Do any of your family members smoke?						
Do you have any family pets? Please indicate type of pet and whether they are kept indoors or outdoors.						
Do you have any special requirements in your family you would like your student to know about?						