

ENGLISH COLLEGE OF ADELAIDE

HOST FAMILY QUESTIONNAIRE

1. Family Surname: _____
Email: _____
Phone: (H) _____ (W) _____ (Mobile) _____
Address: _____ (Post Code) _____

2. List all family members, including yourself. Asterisk * those who have left home.

<u>Name</u>	<u>Age</u>	<u>Relationship</u>	<u>Occupation</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. Have you ever hosted a foreign exchange student? () Yes () No
(If yes, please state: year of visit, duration of visit, country of origin)

4. Why did you apply for this program?

5. Do you prefer to offer Full or Share Accommodation? _____

6. Do you prefer to host a student for a short period (2 weeks to 3 months) or for a long period (3 months or longer) _____

7. List family activities you will share with your visitor.

8. Do you have any household pets? () Yes () No

If yes, what kind of pets do you have? _____

Are your pets inside or outside? _____

9. How far is the College from your house? _____ kms. How long to travel? _____

Is transportation to/from the College available () Yes () No What type? _____

10. Will the visitor have: own bedroom () Yes () No; own bathroom () Yes () No

11. Would you prefer a male or female student? () Female () Male () Either is OK

12. Are there any dietary restrictions in your household? () Yes () No

13. Can you cater for a Vegetarian Student? () Yes () With Difficulty () Not Possible

14. Religion (if applicable): _____
15. Are there any people in your family who smoke? () Yes () No
Where do they smoke? () Inside () Outside
16. Is E-Mail access available for the students? () Yes () No
17. Can a long term student connect their own phone line (at their own expense)?
() Yes () No
18. How many students can you host at one time? () One () Two () Three
19. Are you interested in taking young (under 18) students? () Yes () No
If yes do you have a recent police check? () Yes () No
20. If so, would you be happy to provide a copy? () Yes () No
21. When is the best time to visit you, to answer any further questions you may have?
Daytime (Which day/time?) _____

BRIEF FAMILY HISTORY

** Please feel free to add more on a separate page if you wish.*

** If you have any particular rules you want students to follow, please enclose them with this form.*

STATEMENT OF COMMITMENT

We, the HOST FAMILY, agree to treat our visitor like a family member during his/her stay in our house. We have read the documents relating to Homestay Accommodation and Share Accommodation and understand what is required of us.

* For Homestay Accommodation only - We are aware that we are to provide 3 meals a day, 7 days a week for our student, including a packed lunch for school days.

(Print name of head of family)

(Signature)

(Date)