

APPLICATION DATE: _____



HOMESTAY FAMILY PROGRAM APPLICATION

Holy Spirit Catholic School Division
620 12 'B' Street North Lethbridge, AB
T1H 2L7



Please print clearly – all parts of the application must be completed

PARENT 1		PARENT 2	
First Name / Last Name		First Name / Last Name	
Occupation		Occupation	
Employer's Name		Employer's Name	
Employer's Address		Employer's Address	
Work Phone:		Work Phone:	
Cell: Phone:		Cell: Phone:	
Email Address:		Email Address:	
Interests/Hobbies:		Interests/Hobbies:	
Your Family's Home Address (please include your mailing address if different):			
Town/City:		Province:	Postal Code:

Please list ALL OTHER persons living in your home.

Name:	Age:
Occupation / School and Hobbies:	
Name:	Age:
Occupation / School and Hobbies:	
Name:	Age:
Occupation / School and Hobbies:	
a) Have you ever hosted an international student before? If yes, please briefly describe your experience:	YES <input type="checkbox"/> NO <input type="checkbox"/>
b) Please give specifics as to your hours of work and on-going commitments:	
c) Will there be parental supervision in the evening?	YES <input type="checkbox"/> NO <input type="checkbox"/> OTHER <input type="checkbox"/>
If "other," please explain:	
d) What activities do you and your family enjoy that you would be willing to include your international student in?	
e) Students will often participate in extra-curricular activities. Would you be willing to pick them up and drop them off when needed?	YES <input type="checkbox"/> NO <input type="checkbox"/>
f) Do you belong to any community groups or organizations? (cultural, sports)	YES <input type="checkbox"/> NO <input type="checkbox"/>
g) Does your belief system restrict you from providing for religious and cultural traditions other than your own?	YES <input type="checkbox"/> NO <input type="checkbox"/>
h) Are you willing to provide or arrange transportation if your student chooses to attend a religious service on the weekend?	YES <input type="checkbox"/> NO <input type="checkbox"/>
i) Are there smokers in your home?	YES <input type="checkbox"/> NO <input type="checkbox"/>
j) Do you have any pets? Please list:	YES <input type="checkbox"/> NO <input type="checkbox"/>
k) Some international students are vegetarians or have dietary restrictions. Can you respect and meet any necessary dietary requirements?	YES <input type="checkbox"/> NO <input type="checkbox"/>
l) International students need to be treated as members of your family – with love, nurturing, guidance and respect. Will you encourage your student to join you for family time (walks, groceries, games, movies, etc.)	YES <input type="checkbox"/> NO <input type="checkbox"/>

Please provide two (2) character references:	
Name:	Phone:
Name:	Phone:
<p>I/We _____, have read the <i>Homestay Information Guide</i> for the Holy Spirit Catholic School Division Homestay Family Program and I/we agree to fulfill the necessary requirements. I/We understand and agree that should I/we not fulfill my/our commitment herein, my/our services will be terminated.</p>	
<p>I agree to indemnify and hold harmless the Holy Spirit Catholic School Division, its elected officials and officers, employees, agents, volunteers and representatives, or any of them, from any claims, demands, expenses, costs (including legal costs), suits, debts, liabilities and cause of action for which they may be liable as a result of personal injury or property damage that I or the student cause or contribute, or are held responsible for, jointly or severally, in connection with the student's participation in study in Canada and from any financial obligations the student may incur.</p>	
Signature of Homestay Parent:	Witness:
	Signature:
Signature of Homestay Parent:	Print Name:
	Address:
Date:	Phone:

II. APPLICATION CHECKLIST
<p><i>Ensure your application is complete and that all of the items below are included in your package:</i></p>
<p><input type="radio"/> A complete Homestay Family Program Application (signed and witnessed).</p> <p><input type="radio"/> One or two photos of your family (you may attach them below).</p>
<p>Once we have visited your home and accepted your application, we will require a Police Identity Check (PIC) including Vulnerable Sectors Check, for each individual 18 year and older residing in the home. Holy Spirit Catholic School Division will cover the \$65 fee for this check provided that the individuals submit the original receipts and the original copies for each check within 30 days of receipt. This must be completed once a year. Please note: only families accepted to the program will have their PIC expenses reimbursed. Please wait until your family is accepted to the program prior to obtaining the checks.</p>
<p><i>Please submit completed Homestay Family Program Applications to:</i></p>

IN PERSON/BY MAIL

Holy Spirit International Student Program
620 12B Street North
Lethbridge, AB T1H 2L7
(403) 331 4458

BY EMAIL

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homestay@holyspirit.ab.ca