

Host Family Application Form

*Under terms of the Privacy Act 1993 you need to know that:
The information you give us will be securely held and used solely for Host*

*Families NZ Limited statistical and identification purposes.
You may ask to see and correct any information that we hold on you.*

*It is not compulsory to give us certain information, however the more
information we have the better we are able to match your family with a
suitable student.*

Please read our Homestay Contract before applying.

*** Required**

Host Fathers Full Name : _____

Fathers D.O.B. : _____

Fathers Nationality : _____

Host Mother's Full Name : _____

Mothers D.O.B. : _____

Mothers Nationality : _____

Childrens Name 1 : _____

Children D.O.B : _____

Childrens Gender :

☐ **Female**

☐ **Male**

Childrens Name 2 : _____

Children D.O.B : _____

Childrens Gender :

☐ **Female**

☐ **Male**

Childrens Name 3 : _____

Children D.O.B : _____

Childrens Gender :

☐ **Female**

☐ **Male**

Childrens Name 4 : _____

Children D.O.B : _____

Childrens Gender :

☐ **Female**

☐ **Male**

Childrens Name 5: _____

Children D.O.B : _____

Childrens Gender :

☐ **Female**

☐ **Male**

***Home Address :** _____

***City :** _____

***State :** _____

***Zipcode/Postcode :** _____

Country : _____

Home Phone Number : _____

Work Phone Number : _____

Cell Phone Number : _____

Email Address : _____

Bank Account : _____

Father Occupation : _____

Mother Occupation : _____

Children over 18 : _____

Does any member of your family have an existing medical condition that an international student should be made aware of? (e.g. epilepsy)

- ☐ Yes
- ☐ No

If yes, please state which family member and medical condition

Is English the first language spoken at home:

- ☐ Yes
- ☐ No

If no, please state your first language : _____

Other languages spoken in the home : _____

Any pets at your home:

- ☐ Yes
- ☐ No

If yes, please list any pets and indicate indoor / outdoor:

Please write your family's main religion: (e.g. CATHOLIC) :

Do any of the household members smoke?

- ☐ **Yes**
- ☐ **No**

Would you host a student who smokes?

- ☐ **Yes**
- ☐ **No**

Please list any special dietary restriction (e.g. vegetarian) in your home which may affect students we place with you:

Are you able to cater to the requirements of Muslim students?

- ☐ **Yes**
- ☐ **No**

General family lifestyle , Family activities and interests :

- ☐ **Outdoor sports**
- ☐ **Indoor sports**
- ☐ **Music Piano or Guitar etc**
- ☐ **Language**
- ☐ **Reading**
- ☐ **Travel**
- ☐ **Meeting people**
- ☐ **Animals**
- ☐ **Beach**
- ☐ **Dancing**
- ☐ **Picnic**
- ☐ **Gardening**
- ☐ **Cooking**
- ☐ **Arts**
- ☐ **Movies**

Do you currently host students from other language School/Providers :

- ☐ **Yes**
- ☐ **No**

If so, which other school? _____

Student preferred age? _____

Student preferred gender :

- ☐ **Male**
- ☐ **Female**
- ☐ **Either**

Student Bedroom 1 :

- ☐ **Single room**
- ☐ **Double room**
- ☐ **Twin room**

Student Bedroom 2 :

- ☐ **Single room**
- ☐ **Double room**
- ☐ **Twin room**

Bathroom:

- ☐ **Share Bathroom**
- ☐ **Own Bathroom**

Do you provide internet?

- ☐ **Yes**
- ☐ **No**

When would you be available to begin hosting student?

We require students to be able to travel directly to downtown without the need to change transport. How will the student travel there?

BUS ROUTE # TO / FROM AUCKLAND CBD: _____

TRAIN ROUTE # TO / FROM AUCKLAND CBD: _____

Distance from your home to bus stop / train station : _____

Do you allow us to share your photos on our website?

- ☐ **Yes**
- ☐ **No**

If so, will you be able to share photos of your family with us?

- ☐ **Yes**
- ☐ **No**

HOW DID YOU HERE ABOUT HOST FAMILIES NZ? _____

Other: