**Blue Arrow Homestay Application Form**

* This form should be received ten weeks before your group arrives in Brisbane.
* Confirmation of homestay will be sent after arrival details have been received.
* This application form must be completed by each student individually.

**Attach a**

***recent* photograph here**

*It is vital students provide us with as much information as possible,*

*in particular in relation to any special medical or dietary needs*

**Scan and email application form to:**

C/o [Special-Programs@qut.edu.au](mailto:Special-Programs@qut.edu.au)

***OR*** *return by mail to:*

QUT International College

Victoria Park Road, Kelvin Grove

QLD, 4059 Australia

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| **Program Details *(tick ☑ all boxes that apply)*** |

Name of Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Program start Date: \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ (DD/MM/YY)

Arrival Date: \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ (DD/MM/YY) Departure Date: \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ (DD/MM/YY)

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| Homestay placement preference: | |  Single |  Double (2 students from 1 group in the same homestay ***in their own room***) |
| **Personal Details *(tick ☑ all boxes that apply)*** | | |

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Given Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age (years old on arrival day): \_\_\_\_\_\_\_\_\_ Preferred Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| *(Include country code)*: | | Phone: ( ) | | Mobile ( ) | | | Fax: ( ) \_ | |
| Email 1:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | Email 2 (*if applicable*):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| Gender: | Female  | | Male  | | Marital Status: | Single  | | Married  |

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Emergency Contact Details *(next of kin only)*** |

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Include country code)*: Phone: ( ) Mobile: ( )

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address (as above ) OR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **English Language** |

How long have you been learning English? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| What is your level of English? (circle one per skill) | Listening | Speaking | Reading | Writing |
| 1 = Beginner 2 = Basic 3 = Good 4 = Excellent | 1 2 3 4 | 1 2 3 4 | 1 2 3 4 | 1 2 3 4 |

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| **About You *(tick ☑ all boxes that apply)*** | | | | | | | |
| Have you ever lived in another country? | | Yes  | | No  | | | If yes, where and how long: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you enjoy the company of children? | | Yes  | | No  | | | If yes, what ages (circle all that apply): 0-6 7-12 13+ |
| Do you smoke? | Yes  | | No  | | ***Note: smoking is not allowed inside Australian homes or on QUT campuses!*** | | |
| Do you have a disability? | Yes  | | No  | | Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Do you have any allergies? | Yes  | | No  | | Allergy Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| Do you have any medical conditions? | | Yes  | | No  | | Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Do you have any special dietary needs? | | Yes  | | No  | | Details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Do you have an allergy to or fear of pets? | | Yes  | | No  | | If yes, please circle which (**cats, dogs, birds,** \_\_\_\_\_\_\_\_\_\_). | |
| ***Note: Most homestays have domesticated (clean) pets that are inside and part of the family.*** | | | | | | | |

*Briefly describe your family (e.g. parents’ occupations; number of brothers and sisters; their ages, etc.):*

Mother: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Brothers and Sisters*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you live in a: City apartment  Suburban house  Country home  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are your favourite activities? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tell us more about yourself and your family \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **Declaration *(applicant must read and tick ☑ all boxes before signing and dating the application below)*** |

* I certify the information supplied in this form is correct and complete to the best of my knowledge.
* I understand that information on this application form will be disclosed to the homestay family.
* I understand Australia is a multicultural country and therefore homestay families may be from variety of cultural backgrounds but all our homestay families speak English at home.
* I understand that there are a variety of Australian homestay families, including: Couples with no children / Retired or non-working couples or single people / Families with young or teenage children / Families with two working parents / Single people in homes with spare accommodation / Extended families (where relatives, such as grandparents, are living within the one family home).

Applicant signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_ \_\_/\_\_ \_\_/\_\_ \_\_ (DD/MM/YY)

Thank you for completing this application. I look forward to finding you a good family.

Cora Doody, Homestay Coordinator