 Summer 2024

Host Family Application

5-week program: July 2nd – August 2nd, 2024

*\*\*\* Students will arrive on June 30 or July 1, departing August 2 or 3 \*\*\**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Host Mother (Spouse/Partner) | | | Host Father (Spouse/Partner)  not applicable | | |
| Last Name: | First Name: | | Last Name: | First Name: | |
| Home Address: | | City: | | | Postal Code: |
| Home Telephone: | | | E-mail: *(please print clearly)* | | |
| Host Mother | | | Host Father | | |
| Work Phone: | | | Work Phone: | | |
| Cell Phone: | | | Cell Phone: | | |
| Occupation: | | | Occupation: | | |

**Children:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Gender | Age as of  July 1st , 2024 | Living at home | If attending school, which school are they attending? |
|  | F  M |  | Yes  No |  |
|  | F  M |  | Yes  No |  |
|  | F  M |  | Yes  No |  |
|  | F  M |  | Yes  No |  |

Will anyone else be living in your home during the program?  Yes  No

(i.e. relatives, roommates, boarders or other students) If yes, please explain:

Are you within walking distance to **Pacific Christian School**?  Yes  No

Travel time to the school? by Car:       by Bus:       Route #:

If not a direct bus route, indicate # of transfers needed.

Will you provide car transportation?  Most times  Sometimes

Will student(s) be taking the city bus?  Most times  Sometimes

Do you have any pets?  Yes  No

If yes, please indicate number of pets.  Dogs        Cats       Others

Does anyone in your household smoke?  Yes  No

Is there access to?  TV  Computer  Internet/WIFI  Piano

Others

Hosting Preference:  male only  female only  no preference

Will student(s) have a private room each?  Yes  No

If sharing a room, will there be separate beds?  Yes  No

Does the room have a closet?  Yes  No

Bathroom facilities:  Private  Share with family

Will you allow a student to smoke outside?  Yes  No

Is any member of your family a vegetarian?  Yes  No

If yes, please explain:

Are you willing to accept a student who is a vegetarian?  Yes  No

Are you willing to accept a student with dietary restrictions?  Yes  No

Any religious beliefs and practices you would like noted?  Yes  No

If yes, please explain:

What language is most frequently spoken in the home?  English  Other(s)

Other language(s) spoken?       \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What activities or hobbies does your family enjoy doing? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you willing to abide by the following expectations?**

You will provide a **clean, orderly, pleasant and safe** living environment.  Yes  No

**English** will be used at all times with guest student(s)  Yes  No

Guest student(s) will be **integrated** as much as possible into the family life  Yes  No

You will provide necessary household items such as **linens, towels, etc**.  Yes  No

There will be adequate and appropriate **supervision** for the guest student(s)  Yes  No

Guest student(s) will have **access** to all common areas of the house.  Yes  No

Guest student(s) may attend **church** service of their choices  Yes  No

You will provide three complete **meals** **and snacks** each day (bag lunch for school days)  Yes  No

Provide us with a **criminal record check** (all persons age 18 or over).  Yes  No

You will maintain adequate **home insurance** and will show us proof of such.  Yes  No

Is there anything you would like us to be aware of?  Yes  No

If yes, please explain below:

**References**: Please include the names and phone numbers of two people we can call for a reference. References from other home stay programs are preferred but not mandatory.

*Please advise the persons listed that we will be contacting them.*

|  |  |  |
| --- | --- | --- |
| Name: | Phone #: | Relationship to you: |
| Name: | Phone #: | Relationship to you: |

We will contact you to arrange a time when we can meet to discuss any additional questions either of us may have. During this visit we would also like to view the student’s accommodation.

**5 week program remuneration** to the host family is set at **$240 per week, per student**. This equals $1200 per student or $2400 for hosting two students for the five-week period. At the orientation meeting in **June** we will let you know the exact dates on which **e-transfers** will be sent.

Email address to use for e-transfers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ @ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I understand, that at no time can the placement of a student in my home be guaranteed. SELSA reserves the right to make all placement decisions based on suitability and demand for host families.**

**Have you or any member of the household ever been charged and/or convicted of a crime or sexual offense?  Yes  No**

Signed: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Date: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Please return the completed application form as soon as possible to the address below.

Jaime McFarland

Host Family Coordinator

628 Kestrel Ridge, Victoria, BC., V9B 6C3

Phone: 250-532-0372

E-mail: Jaime@selsa.ca