



Awatapu College International Department

434 Botanical Road
Palmerston North
International Student Office
Telephone: +64 6 356 4817
ext 8883 / 8847
Facsimile: +64 6 356 4819
Mobile: 027 499 5478

HOMESTAY FAMILY INFORMATION	
Family Name	_____
Address	_____
	Post Code _____
Home Phone	_____
Work	Mother _____ Father _____
Mobile	Mother _____ Father _____
Email	_____

HOUSEHOLD MEMBERS					
	Name	M/F	D.O.B.	Occupation	Hobbies/Interests
Mother	_____	_____	_____	_____	_____
Father	_____	_____	_____	_____	_____
Children	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

NON-FAMILY HOUSEHOLD MEMBERS					
	Name	M/F	D.O.B.	Relationship to family	Occupation/School
Other <small>(e.g. boarders, relatives, friends)</small>	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

GENERAL INFORMATION		
Family member(s) who speak or understand other languages besides English	Yes No <small>(Please circle one)</small>	If YES – list the language(s)
Pets	Yes No <small>(Please circle one)</small>	If YES – what type of pet(s) / indoor or outdoor pets
Musical instruments in the house	Yes No <small>(Please circle one)</small>	If YES – list the instrument(s)
Hobbies and interests of the family	_____	

TRANSPORT	
How will the student travel to/from school and the approximate time?	To school:
	From school:
Can you provide transport for students if needed?	Yes No <small>(Please circle one)</small>

HOST INFORMATION				
Have you hosted International Students before?	Yes No (Please circle one)			
How many students could you host?	1 2 3 4 (Please circle one)	Preferred gender of students to host	Male Female Any (Please circle one)	
Is English the first language spoken at home?	Yes No (Please circle one)	If NO – what language(s) is spoken?		
Are you able to host students over the summer holidays?	Yes No (Please circle one)			
Do any household members have specific dietary needs?	Yes No (Please circle one)	If YES – please indicate what they are? i.e. Vegetarian		
Would you consider hosting a student with specific dietary needs?	Yes No (Please circle one)	Example: vegetarian, gluten free, etc		
Do any household members have medical conditions?	Yes No (Please circle one)	If YES – please indicate what they are? i.e. Diabetes		
Do any household members smoke?	Yes No (Please circle one)	If YES – please indicate if smoking occurs indoors or outdoors.		
Would you agree to host a student who smokes?	Yes No (Please circle one)			
Does your family regularly attend church or a place of worship	Yes No (Please circle one)	If YES		
		What religion?		
		Which church / place of worship?		
Do you have access to the internet?	Yes No (Please circle one)	What day do you attend weekly worship?		
		If YES – do you have Wifi available throughout the house?		
What is the total number of bedrooms in your house?		Total number of spare bedrooms		Total number of bathrooms in your house

HOST FAMILY EXPECTATIONS	
What are your family expectations of your student?	
What are the household responsibilities and chores expected of your student?	
What family guidelines do you have for your student?	
What are the curfew expectations for your student?	

REFEREES - List two referees who can be contact (no family members please)			
Name		Name	
Address		Address	
Phone		Phone	
Mobile		Mobile	
Relationship to family		Relationship to family	

We give permission for our contact details to be shared with other Awatapu College homestay families when/if required.	Yes No (Please circle one)
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We give permission for the information on pages 1 and 2 to be sent to the International Student and family.	
Signature: _____	Signature: _____
Name: _____	Name: _____
Date: _____	Date: _____

