



## Home-stay Application Form (under 18s)

### Student

Family Name	_____	First Names	_____
Date of Birth (dd/mm/yy)	_____	Known as	_____
Nationality	_____	Gender (M/F)	_____
E-mail (1)	_____	Mobile	_____
E-mail (2)	_____	UK Mobile	_____
Passport Number	_____	Expiry Date	_____
Visa Number	_____	Expiry Date	_____
Home Address	_____		
Post Code	_____	Home Telephone	_____
Hobbies/interests	_____		
	_____		

### Parents

Father's full name	_____	Nationality	_____
Father's mobile	_____	Father's telephone	_____
Father's profession	_____	Father's E-mail	_____
Father speaks English?	Yes [ ] No [ ]		
Mother's full name	_____	Nationality	_____
Mother's mobile	_____	Mother's telephone	_____
Mother's profession	_____	Mother's E-mail	_____
Mother speaks English?	Yes [ ] No [ ]		
Primary/Emergency contact	_____		_____

### Medical Details

Does the student have any serious allergies? If yes please give details	Yes [ ] No [ ] _____
Has the student ever been hospitalised or had any serious illness? If yes please give details?	Yes [ ] No [ ] _____
Is the student currently taking any medication? If yes please give details?	Yes [ ] No [ ] _____
Does the student have any specific dietary requirements? If yes please give details?	Yes [ ] No [ ] _____

### Educational Details

Does the student have any declared special educational or behaviour needs? If yes please give details?	Yes [ ] No [ ] _____
Level of study	
Main Subjects Taken	(1) _____ (2) _____ (3) _____
Is the student interested in undertaking any short courses or summer schools? If yes please state subject areas &/or specific courses.	Yes [ ] No [ ] _____ _____

## DATE OF HOME-STAY

Please confirm the dates you would like to book home-stay for	From (date of arrival)
	To (date of departure)

## Payment

On receipt of the completed application form we will send you an invoice for payment. Home-Stay will only be confirmed once the full payment has been received.

## Declaration and Agreement

We as the parents of the student named above agree:

1. that Greenfinch Guardians will act as guardian to our child in our absence, "in loco parentis", with our express authority to act in any situation, including in the event of emergencies. We understand Greenfinch Guardians may sign on our behalf if permission is required for anesthetic and /or surgical treatment. We, as parents/guardian further understand that, whilst every effort will always be made to contact us in the event of an emergency, this may not always be possible.
2. that Greenfinch Guardians will sign on our behalf when reasonable school requests are received for parental/guardianship permission for your child to participate in school activities or excursions. High cost (over GBP50) or high risk activities will be referred to you in accordance with company policy (see Overseas Parents Handbook 2015-16).
3. that a full term's notice is required (except in the final terms of year 13) to terminate the guardianship agreement. A term's fees must be charged by Greenfinch Guardians in lieu of such notice.
4. that a general minimum standard of behaviour is required from the student. Serious or continual misconduct could lead to the expulsion of the student from the school and/or termination of the guardianship agreement by Greenfinch Guardians.
5. That this guardianship agreement shall be governed by the laws of England and Wales and that it shall be effective from the "Start Date" above assuming that Greenfinch Guardians have received cleared funds in accordance with the terms hereof.

We/I have read and understood the conditions above      Yes [ ] No [ ]

Application completed by

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Signature \_\_\_\_\_