



OTTAWA-CARLETON  
DISTRICT SCHOOL BOARD

# Ottawa International Student Program Homestay Application



☎ Telephone (613) 686 6764; Fax (613) 693-0878  
✉ Email [ocenet@canadahomestayinternational.com](mailto:ocenet@canadahomestayinternational.com)

Please check one of the following:

- I require homestay and custodianship arrangements.
- I require homestay arrangement only.

PERSONAL INFORMATION					
SURNAME (FAMILY NAME)		GIVEN NAMES		ENGLISH NAME (if applicable)	
PERMANENT MAILING ADDRESS					
STUDENT'S EMAIL:			TELEPHONE:		
PARENT'S EMAIL:			TELEPHONE:		
<input type="checkbox"/> Male	<input type="checkbox"/> Female	DATE OF BIRTH (Month / Day / Year)		ESTIMATED DATE OF ARRIVAL	
PLEASE CHECK (✓) THE WORDS THAT BEST DESCRIBE YOUR NATURE					
<input type="checkbox"/> outgoing	<input type="checkbox"/> cheerful	<input type="checkbox"/> hardworking	<input type="checkbox"/> optimistic	<input type="checkbox"/> studious	<input type="checkbox"/> Other:
<input type="checkbox"/> shy	<input type="checkbox"/> quiet	<input type="checkbox"/> neat	<input type="checkbox"/> independent	<input type="checkbox"/> serious	
PLEASE CHECK (✓) THE ACTIVITIES WHICH INTEREST YOU					
<input type="checkbox"/> Baseball	<input type="checkbox"/> Concerts	<input type="checkbox"/> Golf	<input type="checkbox"/> Martial Arts	<input type="checkbox"/> Paint/Draw	<input type="checkbox"/> Soccer
<input type="checkbox"/> Basketball	<input type="checkbox"/> Cooking	<input type="checkbox"/> Hiking/walking	<input type="checkbox"/> Music: listening	<input type="checkbox"/> Photography	<input type="checkbox"/> Swimming
<input type="checkbox"/> Biking	<input type="checkbox"/> Dance	<input type="checkbox"/> Hockey/Skating	<input type="checkbox"/> Music: playing Your instrument: _____	<input type="checkbox"/> Reading	<input type="checkbox"/> Tennis
<input type="checkbox"/> Board Games	<input type="checkbox"/> Fishing	<input type="checkbox"/> Horseback Riding		<input type="checkbox"/> Skiing/ Snowboarding	<input type="checkbox"/> Video Games
<input type="checkbox"/> Computers	<input type="checkbox"/> Fitness				
LIST FOODS YOU <b>DO NOT LIKE</b> TO EAT			LIST FOODS YOU <b>CANNOT</b> EAT		
PLEASE INDICATE PREFERENCES FOR YOUR HOMESTAY (CHOICES ARE NOT GUARANTEED):					
	YES	OK	NO	(If No, please tell us why)	
young children	☐	☐	☐	_____	
teenagers	☐	☐	☐	_____	
another student	☐	☐	☐	_____	
couple with no children	☐	☐	☐	_____	
no strong preferences	☐	☐	☐	_____	
PERSONAL HABITS:					
I like to wake up: <input type="checkbox"/> very early <input type="checkbox"/> when I have to.					
When I wake up I like <input type="checkbox"/> to be quiet <input type="checkbox"/> to talk <input type="checkbox"/> to listen to music.					
On school nights I usually go to bed at _____ am/pm.					
My curfew on school nights is _____ am/pm    or <input type="checkbox"/> I don't have a curfew on weeknights.					



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My curfew on weekends is \_\_\_\_\_ am/pm or  I don't have a curfew on weekends.

When I go out with my friends, we like to: \_\_\_\_\_

I tidy up my own bedroom and make my own bed  yes  no, my \_\_\_\_\_ does it for me.

My attitude towards school is:  I like it a lot  it's OK  I don't really like it.

I usually do my homework:  right after school  after dinner  before going to bed.

ENGLISH SPEAKING ABILITY  beginner  low intermediate  intermediate  advanced  fluent

### MEDICAL INFORMATION

**Do you have any special medical conditions or needs?**  Yes  No  
If Yes, please explain. \_\_\_\_\_

**Are you taking any medication?**  Yes  No  
If Yes, please explain. \_\_\_\_\_

**Do you have any allergies?**  Yes  No  
If Yes, please explain. \_\_\_\_\_

**Do you smoke?**  Yes  No  
If Yes, you must agree **not** to smoke inside your school and your Homestay Host's home (you may be allowed to smoke outside).  
Do you agree not to smoke inside (including your bedroom)?  Yes  No  
Will you accept Placement in a home where there are smokers?  Yes  No

### YOUR FAMILY MEMBERS

NAME	RELATIONSHIP	AGE	OCCUPATION

### AGENT INFORMATION

AGENCY NAME:  
CONTACT:  
EMAIL: TELEPHONE #:  
FAX:

### OTHER CONTACT (ENGLISH SPEAKING) IF DIFFERENT FROM AGENT

NAME: RELATIONSHIP TO STUDENT:  
EMAIL: TELEPHONE #:  
FAX:

### PERIOD OF HOMESTAY REQUIRED (INDICATE DATE/MONTH/YEAR)

HOMESTAY TO BEGIN:  
HOMESTAY TO END:  
NUMBER OF CONTINUOUS MONTHS HOMESTAY IS REQUIRED:



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## DECLARATION and DISCLAIMER

I (we) declare that:

- (1) the information given in this Homestay Application is complete and correct to the best of my (our) knowledge;
- (2) I (we) have read and fully accept all CHI Invoice Terms and Conditions;
- (3) I (we) have read and agree to comply with the CHI Homestay Guide for International Students;
- (4) I (we) agree to pay for any and all expenses incurred by or on behalf of the undersigned Student at the homestay host assigned to the Student by CHI (including but not limited to any losses or damages caused by the undersigned Student, the undersigned Student's long distance telephone expenses and medical expenses);
- (5) I (we) hereby waive, release and absolve and agree to indemnify and save harmless the Canada Homestay Network Inc. (including CHI) and its officers, Directors, employees, agents and independent service providers (including but not limited to the homestay hosts and transportation service providers selected for the undersigned) from any and all liability for all the undersigned's losses and damages (including, but not limited to the loss or theft of the undersigned Student's money and the damage, loss or theft of the undersigned Student's personal belongings), personal injuries, or death, however caused; and
- (6) I (we) agree to obtain all necessary and sufficient insurance.

Student's signature \_\_\_\_\_

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

Parent's signature (if Student is under the age of 18) \_\_\_\_\_

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

Parent's signature (if Student is under the age of 18) \_\_\_\_\_

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



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## STUDENT LETTER

In this letter to your host family, please tell us about yourself and about why you are applying to study in Canada. You may include your future goals, a little about your life at home and at school in your own country, what you are looking for in a homestay family, and any particular areas of interest you would like to learn about while in Canada.

Student  
Photograph

Student's Signature

Date:



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### PARENTAL LETTER OF INTRODUCTION

Please write a letter describing your child's personality, interests, relationships, future aspirations and home life. Feel free to add any other relevant information which may be helpful to a teacher or host family.

Parent's Signature

Date:



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