



The following information will help in placing you with a homestay family similar to your own interests and background. Please give as much information as possible.

Please complete all parts of this application.

Date of Application: _____
(Month/Day/Year)

A. APPLICANT'S PERSONAL INFORMATION

Name (as on passport): _____
Surname First Middle

Address: _____
Street Address City/Province/Country Postal Code

Phone: _____ Email: _____

Parent's Cell Phone: _____ Date of Birth: _____ ☐ Male ☐ Female
(Month/Day/Year)

Father's Name: _____ Occupation: _____

Mother's Name: _____ Occupation: _____

Please list the names and ages of each of your brothers and sisters:

Name: _____ Age: _____ ☐ Male ☐ Female

Name: _____ Age: _____ ☐ Male ☐ Female

Name: _____ Age: _____ ☐ Male ☐ Female

Have you ever been away from your family for long periods of time? ☐ Yes ☐ No

If yes, explain. _____

Do you smoke? ☐ Yes ☐ No

Are you a vegetarian? ☐ Yes ☐ No

What foods do you like to eat? _____

What foods do you NOT like to eat? _____

What language(s) do you speak? _____

Have you studied English? ☐ Yes ☐ No If so, where and for how long? _____

Do you have any worries about coming to Canada? ☐ Yes ☐ No

If yes, explain. _____

Describe your personality (strengths). _____

Which activities do you do in your country? (e.g. school/club activities and/or activities outside of school)

What would you like to do/learn while in Winnipeg/Canada? Please explain. _____

What are your expectations of your stay in Winnipeg? _____

B. APPLICANT'S MEDICAL INFORMATION

Do you have any allergies? (e.g. medication, food, dogs, cats, etc.) ☐ Yes ☐ No

If yes, explain. _____

Do you take any medication? ☐ Yes ☐ No

If yes, explain. _____

Do you use an inhaler? ☐ Yes ☐ No

Do you carry an epi-pen? ☐ Yes ☐ No

Do you have or have you had any medical, psychiatric or emotional conditions that could impact your ability to be successful in living with a homestay family? ☐ Yes ☐ No

If yes, explain. _____

Are there any medical or physical reasons why you cannot take part in sports or outdoor activities?

☐ Yes ☐ No If yes, explain. _____

C. HOMESTAY FAMILY PREFERENCES

Some of our homestay families have children who will be younger or older than you. Although we find that the majority of students prefer to live with someone of the same gender and age, it is not always possible.

Family type preferences (check ALL that apply):

☐ Prefer no children ☐ Prefer small children/babies (ages 1-10) ☐ Prefer younger children/teens (ages 11-18)

☐ Prefer other international students ☐ No preference

Note: Many Canadian families have pets in their homes (typically cats and/or dogs).

Would you like to live in a home with pets? ☐ Yes ☐ No ☐ No preference

What are your expectations of your homestay family? _____

How do you see yourself as part of your new family? _____

D. HOMESTAY PLACEMENT AGREEMENT

All of our schools and homestay families provide a non-smoking environment.

The signatures below acknowledge agreement with the following:

- ☐ All of the information provided on this Homestay Placement Form is true and it will be relied upon by the Pembina Trails School Division to locate the best available homestay family that matches the needs of the student.
- ☐ Any inaccuracy on this Homestay Placement Form would be grounds to permit the Pembina Trails School Division, at its discretion, to dismiss the student and return them home, at their parent’s expense without tuition refund.
- ☐ That the Homestay Program will select a family from those available based on the information provided, but they cannot guarantee that all personal preferences will be met.

Student Signature	Date

Parent Signature	Date

Please complete and return to:
<div><div>Homestay Program</div><div>Pembina Trails School Division</div><div>International Student Program</div><div>181 Henlow Bay, Winnipeg, MB R3Y 1M7</div><div>Canada</div><div>Fax: 204.487.4021</div><div>Email: isp@pembinatrails.ca</div></div>