

International Student Program - Homestay Application

Telephone (613) 686 6764 or Toll Free in North America (877) 441 4443; fax (613) 693 0878

Email algonquin@canadahomestayinternational.com

PERSONAL INFORMATION							
SURNAME (FAMILY NAME) GIVEN N		NAMES	ENGLIS	ENGLISH NAME (if applicable)			
PERMANENT MAILING ADDRESS							
STUDENT'S EMAIL TELEPHONE							
FAMILY CONTACT (IN THE EVEN OF	AN EMERGENCY)			TELEPHONE			
DATE OF	BIRTH (Month Day	Year)	NATIONALITY	LANGUAGE			
Male Female							
ENGLISH SPEAKING ABILITY	□ beginner [☐ low intern	nediate 🖵 intermediate	advanced 🗖 fluent			
AGENT INFORMATION							
AGENCY NAME:		ONTACT:	-11				
EMAIL: FAX:	TH	ELEPHONE	#:				
PROGRAM OF STUDY			ALGONQUIN STU	IDENT #			
			TEGOT (QUIT OF C	221111			
PERIOD OF HOMESTAY REQUIRED (INDICATE DAY/MONTH/YEAR)							
HOMESTAY TO BEGIN:	,		,				
HOMESTAY TO END:							
NUMBER OF CONTINUOUS WEEF	KS HOMESTAY IS R	REQUIRED:					
HOMESTAY REQUESTS							
OPTIONS		PETS		_			
Full Board (3 meals)			reference	Cats AND Dogs OK			
Half Board (Breakfast and Dinner)			OK	Dogs OK			
Roomstay			't like pets	☐ I am allergic to pets			
LIST FOODS YOU DO NOT LIKE TO EAT			LIST FOODS YOU CANNOT EAT				
PLEASE INDICATE PREFERENCES FOR YOUR HOMESTAY (CHOICES ARE NOT GUARANTEED):							
,	YES OK		(If No, please tell us why)				
young childre teenage		<u> </u>					
another stude		<u> </u>					
couple with no child	ren 🗅 🗅						
no strong preferenc	es 🗖 🗖			\			
EXTRA SERVICES (Charges will apply)							
Airport Pickup Service (on arriv	al)	☐ Airpo	ort Return Service (on o	departure)			



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☐ Outgoing ☐ Shy		ГНАТ BEST DESCRIBE YOUR				
0 0	☐ Cheerful	☐ Hardworking	☐ Independent	□ Neat	□ other:	
— UII y	☐ Serious	☐ Optimistic	☐ Quiet	☐ Studious		
,) THE ACTIVIT	IES WHICH INTEREST YOU				
☐ Baseball	⊂ □ Concerts		☐ Martial Arts	☐ Paint/Draw	☐ Soccer	
□ Basketball	Cooking	Hiking/walking	☐ Music: listening		■ Swimmi	ng
☐ Biking	☐ Dance	☐ Hockey/Skating	•		☐ Tennis	J
☐ Board Games	Fishing	☐ Horseback	Your instrument:	- U	☐ Video G	ames
□ Computers	☐ Fitness	Riding		Snowboarding		
WHAT IS YOUR OC	CUPATION?	Student Other O	Details			
PLEASE DESCRIBE	YOURSELF AN	D THE THINGS YOU WOULI	D LIKE TO DO WITH Y	OUR HOST FAMILY.		
MEDICAL INFO						
		conditions or needs?			☐ Yes	□No
If Yes, please explain					= 1 c ₀	-110
Are you taking any					☐ Yes	□No
If Yes, please explain.						
Do you have any allergies?					☐ Yes	□ No
If Yes, please explain.						
Do you smoke? NOTE: If Yes, you must agree not to smoke inside your school and your Homestay Host's hom (you may be allowed to smoke outside).					e □ Yes	□ No
		uding your bedroom)? where there are smokers?			☐ Yes	□ No
3 1	temeni in a nome u	nere there are smokers:				
					☐ Yes	□ No
YOUR FAMILY M						□No
YOUR FAMILY M NAME		RELATIONSHIP	AGE	OCCUPAT		□No
		RELATIONSHIP	AGE	OCCUPAT		□No
		RELATIONSHIP	AGE	OCCUPAT		□ No
		RELATIONSHIP	AGE	OCCUPAT		□ No
		RELATIONSHIP	AGE	OCCUPAT		□ No
		RELATIONSHIP	AGE	OCCUPAT		□ No
		RELATIONSHIP	AGE	OCCUPAT		□No
		RELATIONSHIP	AGE	OCCUPAT		□ No
NAME	3	RELATIONSHIP I SPEAKING) IF DIFFERI		OCCUPAT		□ No
NAME	3	I SPEAKING) IF DIFFERI				□No
OTHER CONTAC	3	I SPEAKING) IF DIFFERI RELA	ENT FROM AGENT			□ No
OTHER CONTAC	3	I SPEAKING) IF DIFFERI RELA	ENT FROM AGENT TIONSHIP TO STUDE			No
OTHER CONTACT NAME: EMAIL: FAX:	CT (ENGLISH	I SPEAKING) IF DIFFERI RELA TELEF	ENT FROM AGENT TIONSHIP TO STUDE			No
OTHER CONTACT NAME: EMAIL: FAX: DECLARATION:	CT (ENGLISH	I SPEAKING) IF DIFFERI RELA TELEF MER	ENT FROM AGENT TIONSHIP TO STUDE PHONE #:	ENT:	ION	No
OTHER CONTACT NAME: EMAIL: FAX: DECLARATION: For students of all	CT (ENGLISH and DISCLAIM	I SPEAKING) IF DIFFERI RELA TELEF MER ay is an important privileg	ENT FROM AGENT TIONSHIP TO STUDE PHONE #:	ENT: at provides enjoyment i	and other	
OTHER CONTACT NAME: EMAIL: FAX: DECLARATION: For students of all benefits, to Students	CT (ENGLISH and DISCLAIM l ages, homestants and homes	I SPEAKING) IF DIFFERI RELA TELEF MER ny is an important privileg tay Hosts alike. This Stud	ENT FROM AGENT TIONSHIP TO STUDE PHONE #: ge and opportunity the lent Participation Age	ENT: at provides enjoyment (reement (SPA) is desig	and other	rify
OTHER CONTACT NAME: EMAIL: FAX: DECLARATION: For students of all benefits, to Student what is reasonably	and DISCLAIN I ages, homestory and homes by expected of S	I SPEAKING) IF DIFFERI RELA TELEF MER ay is an important privileg	ENT FROM AGENT TIONSHIP TO STUDE PHONE #: The and opportunity the dent Participation Agent ment of the Student	ENT: at provides enjoyment of the comment of the Student is	and other ned to class	rify 19



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Whereas the Student has completed this CHI International Student Homestay Application (SHA) and paid CHI to provide certain homestay services (in accordance with the CHI Homestay Program Payment Policy and Procedures which the Student hereby acknowledge that they have read, understand and are in agreement with),

The Student hereby agrees:

- 1. In general, the Student will:
 - (i) obey the laws of Canada;
 - (ii) not use drugs or medication unless prescribed by a registered physician; and
 - (iii) if the Student is less than 19 years of age, not purchase or consume tobacco or alcoholic beverages or drive a motor vehicle.
- 2. Insofar as their relationship with their homestay Host is concerned, the Student will behave as a considerate and respectful member of the homestay Host family by:
 - (i) accepting any homestay Host, regardless of their race, creed or faith;
 - (ii) make an effort to talk with and be part of the homestay Host household and participate in their activities;
 - (iii) helping around the household: accept responsibility for reasonable jobs, including keeping your room clean, helping with the dishes and doing your personal laundry;
 - (iv) observing the homestay Host household rules (if any), especially concerning the operation of any household appliances, such as the stove (to limit the risk of fire) and curfews If you are going out, tell your homestay host where you are going and when you will be home. If you are likely to be late home, telephone and inform your homestay Host.
 - (v) keeping themselves clean, by regular personal hygiene;
 - (vi) paying for damage to their Host's property, caused by the Student (if any); and
 - (vii) paying for the Student's personal expenses, such as international telephone calls.
- 3. Insofar as their performance at school is concerned, the Student will:
 - (i) attend school daily, or as otherwise instructed by the school;
 - (ii) complete all homework and assignments;
- 4. The Student declares that:
 - (i) the information given in this Homestay Application is complete and correct to the best of the Student's knowledge;
 - (ii) the Student has read and fully accepts all CHI Invoice Terms and Conditions;
 - (iii) the Student has read and agrees to comply with the CHI Homestay Guide for International Students;
 - (iv) the Student agrees to pay for any and all expenses incurred by the Student or on the Student's behalf at the homestay host assigned to the Student by CHI (including but not limited to any losses or damages caused by the Student, the Student's long distance telephone expenses and medical expenses);
 - (v) the Student hereby waives, releases and absolves and agrees to indemnify and save harmless 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 Student) from any and all liability for all the Student's losses and damages (including, but not limited to the loss or theft of the Student's money and the damage, loss or theft of the Student's personal belongings), personal injuries, or death, however caused; and
 - (vi) the Student agrees to obtain any and all medical and travel insurance (including for sickness, personal injury, liability and personal belongings).



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- 5. The understanding and support of the Student helps to ensure a satisfactory homestay experience, for everyone involved. In the event of a breach of this SPA by the Student, CHI and CHN reserve the right, in their absolute discretion, to:
 - (i) notify the Student of the breach (by fax or email or telephone) and provide the Student with twenty-four (24) hours to remedy the breach, such remedy to be subject to the agreement of CHI; and/or
 - (ii) relocate the Student to a second and final Homestay Host, at the expense of the Student and without refund of the unused and prepaid Homestay Host fees paid to the first Homestay Host; and/or
 - (iii) notify Citizenship and Immigration Canada of the breach (with the result that the Student's Passport may be confiscated and the Student's Study Permit or Visa may be cancelled); and/or
 - (iv) expel the Student from the CHI International Student Homestay Program and the Student's Homestay Host, on one (1) hours written notice, to unsupervised accommodation in a hotel, at the Student's risk and expense; and/or;
 - (v) instruct the Student to return home via the first available flight, at the Student's risk and expense.
- 6. The consequences of a breach of this SPA by the Student (including but not limited to the consequences described in paragraphs 5 (i) to 5 (v) herein) are without recourse to CHI and CHN, its officers and directors, employees, agents and independent service providers (including but not limited to any homestay Host and transportation service provider). The Student further agrees to reimburse CHI on demand, its fees and expenses related to any such breach (including for each relocation, Canadian \$500 for fees and Canadian \$100 for transportation expenses).
- 7. The Student also understands and agrees that this SPA forms part of their CHI Homestay Application and their Declaration therein.

(Please sign and date. Thank you.)	
Student's Name	
Family Name Given Name English Name (if applicable) Signature Date	
Student's Parents' Names (if student	nt is under 18)
Relationship: Family Name Given Names Signature Date	
Relationship: Family Name Given Names Signature Date	

