



International Education Services

36 Regatta Avenue
Richmond Hill, ON L4E 4R1 Canada
www.yrdsb-international.ca

Telephone: (905) 884-3434
Fax: (905) 773-2406
homestay@yrdsb.edu.on.ca

PLEASE PRINT CLEARLY

☐ **SUMMER ENGLISH LANGUAGE ACADEMY** ☐ **ESL SUMMER CREDIT** ☐ **SUMMER CREDIT**

STUDENT'S PERSONAL INFORMATION

LASTNAME (family name)		FIRST NAME	
OTHER NAME USED		EMAIL ADDRESS	
<input type="checkbox"/> MALE	DATE OF BIRTH (MM/DD/YEAR)	PRESENT GRADE	COUNTRY OF RESIDENCE
<input type="checkbox"/> FEMALE	/ /		
LEVEL OF ENGLISH LANGUAGE		FIRST LANGUAGE	NATIONALITY
<input type="checkbox"/> BEGINNER <input type="checkbox"/> INTERMEDIATE <input type="checkbox"/> ADVANCED			

PLACE
PHOTO
HERE

PARENTS' PERSONAL INFORMATION

FATHER LASTNAME (family name)	FIRST NAME	EMAIL ADDRESS
MOTHER LASTNAME (family name)	FIRST NAME	EMAIL ADDRESS

HOMESTAY REQUIREMENTS

PROGRAM START DATE (MM/DD/YEAR)	/ /	PROGRAM END DATE (MM/DD/YEAR)	/ /
PLEASE CHECK (✓) THE WORDS THAT BEST DESCRIBE YOUR CHARACTER			
<input type="checkbox"/> OUTGOING	<input type="checkbox"/> CHEERFUL	<input type="checkbox"/> HARDWORKING	<input type="checkbox"/> INDEPENDENT
<input type="checkbox"/> SHY	<input type="checkbox"/> SERIOUS	<input type="checkbox"/> OPTIMISTIC	<input type="checkbox"/> QUIET
<input type="checkbox"/> NEAT <input type="checkbox"/> OTHER: _____			
<input type="checkbox"/> STUDIOUS			
PLEASE CHECK (✓) THE ACTIVITIES WHICH INTEREST YOU			
<input type="checkbox"/> SPORTS	<input type="checkbox"/> MOVIES	<input type="checkbox"/> SHOPPING	<input type="checkbox"/> ARTS & CRAFTS
<input type="checkbox"/> READING	<input type="checkbox"/> CYCLING	<input type="checkbox"/> FISHING	<input type="checkbox"/> COOKING
		<input type="checkbox"/> MUSIC	<input type="checkbox"/> SWIMMING
		<input type="checkbox"/> WRITING	<input type="checkbox"/> OTHER: _____
LIST FOODS YOU DO NOT LIKE TO EAT		LIST FOODS YOU CANNOT EAT	

PLEASE **DESCRIBE YOURSELF** AND THE THINGS YOU WOULD LIKE TO DO WITH YOUR HOST FAMILY.
IF NECESSARY, USE AN ADDITIONAL SHEET AND ATTACH TO APPLICATION.

CUSTODIAN INFORMATION

I hereby solemnly declare that I will undertake the full custodianship for the student indicated herein during his/her stay in Canada.

SURNAME (FAMILY NAME)	FIRST NAME	SIGNATURE
WORK TELEPHONE NUMBER (INCLUDE AREA CODE)	HOME/CELL-PHONE NUMBER (INCLUDE AREA CODE)	EMAIL ADDRESS
STREET ADDRESS	CITY	PROVINCE
		POSTAL CODE

FOR YRDSB HOMESTAY USE ONLY

HOST FAMILY PLACEMENT	SCHOOL	GRADE
PROGRAM START DATE (MM/DD/YEAR)	PROGRAM END DATE (MM/DD/YEAR)	DURATION OF HOMESTAY
/ /	/ /	<input type="checkbox"/> 2 WEEKS <input type="checkbox"/> 3 WEEKS
		<input type="checkbox"/> 4 WEEKS <input type="checkbox"/> 5 WEEKS <input type="checkbox"/> 6 WEEKS <input type="checkbox"/> 7 WEEKS <input type="checkbox"/> 8 WEEKS

YRDSB Homestay Services (Short-term)

HEALTH INFORMATION

Do you have a physical or medical condition for which you require special medication or services? ☐ YES ☐ NO
(This includes conditions such as ADD/ADHD, anxiety or depression.) If yes, please explain :

Are you taking any medication? If yes, please explain: ☐ YES ☐ NO

Do you have any allergies? If yes, please explain: ☐ YES ☐ NO

Do you smoke? If yes, you must agree not to smoke at school or in your Homestay location. ☐ YES ☐ NO

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

Are you able to live in a house that has pets? If no, please provide details: ☐ YES ☐ NO

DECLARATION

The undersigned declare that:

- (1) the information given in this application is complete and correct, to the best of our knowledge;
- (2) we have read, accept and agree to conform with the expectations of students in York Region District School Board (YRDSB) Homestay Guide for Students;
- (3) we agree to pay for the expenses incurred by or on behalf of the undersigned student, related to their participation in YRDSB academic, extra curricular and homestay programs (including but not limited to the student's long distance telephone expenses and medical expenses);
- (4) we agree that the student is capable of participating safely in all such activities, except as otherwise advised in writing;
- (5) the undersigned student is in good health and has not been exposed to any infectious disease during the 4 weeks immediately prior to his/her arrival in Canada; otherwise, we agree to notify YRDSB immediately and cancel or delay the student's arrival in Canada, as required by YRDSB, without recourse;
- (6) should the custodian not be available in the case of the undersigned student's illness or injury, we hereby give permission to the Host family to secure medical treatment by a physician to order related medical treatment and hospitalization (including but not limited to the use of medication, anesthetic and surgery); medication carried by the student will not be administered if its contents and instructions are not in English and properly labeled by a licensed pharmacist or physician;
- (7) we hereby waive, release and absolve and agree to indemnify and save harmless YRDSB and their 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 student's money and the damage, loss or theft of the student's personal belongings), personal injuries, or death, except such as results solely from its or their willful neglect or willful default;
- (8) we agree to obtain all necessary and sufficient insurance; and
- (9) we hereby grant full custodianship to the Authorized Agent/Custodian named herein during the student's stay in Canada. We understand and agree that this application is also subject to a Student Participation Agreement, to be signed by us.

PLEASE PRINT YOUR NAMES AND SIGN BELOW.

STUDENT'S NAME	STUDENT'S SIGNATURE	DATE
PARENT'S NAME	PARENT'S SIGNATURE	DATE
PARENT'S NAME	PARENT'S SIGNATURE	DATE

AGENT/AGENCY INFORMATION

AGENCY NAME		CONTACT PERSON	TELEPHONE NUMBER (INC. AREA CODE)
CITY	PROVINCE	COUNTRY	EMAIL ADDRESS

YRDSB Homestay Services (Short-term)

STUDENT HOMESTAY PARTICIPATION AGREEMENT

The York Region District School Board Homestay Services (YRDSBHS) Homestay Program offers an enriching experience for both the students and the homestay hosts alike. With any important privilege comes responsibility. For students under 18 years of age attending York Region District School Board (YRDSB), this student Participation Agreement is designed to clarify what is reasonably expected of them, to confirm the commitment of the students and the students' parents and /or guardians to comply with this agreement and to specify the consequences, in the unlikely event that the student fails to comply.

- A. The undersigned acknowledge the expectations of the student by homestay hosts, as described in the Homestay Guide for students, which they have read, understood and are in agreement with.
- B. The undersigned have requested YRDSBHS to introduce the student to a homestay host, as part of the Homestay Application Form.
- C. The homestay placement will be finalized only upon receipt of the signed student Participation Agreement.

The undersigned hereby agree:

1. The student will:
 - obey the laws of Canada
 - not purchase tobacco or alcoholic beverages (if under age)
 - not use drugs or medication unless prescribed by a registered physician
 - not drive a motor vehicle
 - not participate in gang activity
 - not accept employment in Canada
2. The student will behave as a considerate and respectful guest of the homestay host by:
 - obeying the host house rules and guidelines
 - keeping clean and paying attention to personal hygiene
 - keeping the student's room clean and doing personal laundry if required by the Homestay host
 - paying for the student's personal expenses, such as international telephone calls, excessive use of internet service
3. Insofar as performance at school is concerned, the student will:
 - attend school as outlined by the program in which they are registered, or otherwise, as instructed by the school
 - complete all homework and assignments (as applicable)
4. Termination Policy
 - should the student wish to terminate the student Participation Agreement, the student requires a written note signed by the student's parents(s)/guardian(s).
5. Refund Policy
 - the homestay placement fee (\$300) is non refundable in the case of cancellation, including visa denial
6. Failure to comply with this agreement and/or any provision of the Homestay Guide For students, at the discretion of YRDSB and/or the homestay host may result in, but not limited to, the following consequences:
 - notify the undersigned of the failure, with at least 24 hours notice to propose a timely remedy for the failure
 - relocate the student to not more than one other homestay host

The undersigned further understand and agree that any and all consequences of any failure to comply with this agreement are without recourse (including but not limited to any and all risks, losses and injuries to the student and any refund of fees to YRDSB, YRDSBHS, its officers and directors, employees and agents, the homestay provider, its officers, and directors, employees and agents; and any homestay host. The undersigned hereby indemnifies and save harmless YRDSB its affiliates and its respective directors, officers, trustees, employees and agents of, from and against any and all liabilities, losses, damages, costs, claims, suits, actions, charges, expenses and legal fees (as a solicitor and his/her own client) actions, charges, expenses and legal fees of any kind or nature whatsoever or resulting from: any breach, violation or non-performance of any obligation of the undersigned under or contained in this agreement; and any damage to or destruction of property howsoever occasioned of or by the undersigned, including , without limitation, any injury to any person or persons, including death resulting at any time therefrom, occurring as a result of the undersigned's Homestay Placement and admission in a school of YRDSB.

To be signed by the student and parent(s)/guardian(s) and a representative of YRDSB.

STUDENT'S LASTNAME	STUDENT'S GIVEN NAME	STUDENT'S ENGLISH NAME (IF APPLICABLE)
SIGNATURE		DATE
PARENT'S OR GUARDIAN'S LASTNAME	PARENT'S OR GUARDIAN'S GIVEN NAME	RELATIONSHIP
SIGNATURE		DATE
YRDSB HOMESTAY SERVICES	SIGNATURE	DATE