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Accommodation Application Form

Please complete all details

1. Personal Details	
Family Name:	First Name:
Preferred Name:	Other Known Names:
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of Birth: Day: Month: Year: 19
Country of birth:	Country of citizenship:
Occupation:	Passport Number:
2. Contact Information	
Contact Address For Correspondence	
Street:.....	
City:.....	
Phone:	Fax:
Mobile:	Email:
2. Accommodation Details	
a. Do you prefer: Homestay <input type="checkbox"/> Hostel <input type="checkbox"/>	
b. How long will you live in Homestay/Hostel weeks (<i>Minimum 4 weeks</i>) Start Date Day Month Year End Date Day Month Year	
c. Is there any food you can not eat? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list	
d. Do you have any medical problems/allergies? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list	
e. Do you have any special religious requirements? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list	
f. Do you smoke? Yes <input type="checkbox"/> No <input type="checkbox"/>	
g. Do you mind if members of your homestay smoke? Yes <input type="checkbox"/> No <input type="checkbox"/>	
h. Are you comfortable being placed in a family with young children? Yes <input type="checkbox"/> No <input type="checkbox"/>	
i. Are you happy to have other homestay students in your homestay family? Yes <input type="checkbox"/> No <input type="checkbox"/>	
j. Do you have own transportation? Yes <input type="checkbox"/> No <input type="checkbox"/>	
k. Do you have a driver's license valid for New Zealand? Yes <input type="checkbox"/> No <input type="checkbox"/>	
l. Where do you prefer to live? <input type="checkbox"/> Close to Institute <input type="checkbox"/> Close to City Center <input type="checkbox"/> No Preference	
m. What hobbies/sports/interests do you enjoy?	
n. Do you have any special requirements? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please list	
3. Declaration and Signature	
I authorize Waikato Institute of Education to look for accommodation on my behalf and am willing to pay the placement fee NZ\$160. I agree that I must remain in a homestay for a minimum of 4 weeks and must pay 2 weeks rent and the bond of 2 weeks rent in advance. I also agree that additional conditions may apply for living in a hostel.	
Signature: _____ Date: _____	

OFFICE USE ONLY

Approved by: _____

Signature: _____

Date: _____

Accommodation Details

Host/Land Lord Name: _____

Phone Number: _____

Contact Address: _____

Comments: _____