Homestay application



The homestay placement fee of A\$250 must be paid to Deakin University BEFORE you submit this application (DUELI students only). This application must be completed and emailed to Student Accommodation Services (SAS) AT LEAST TWO WEEKS BEFORE YOUR ARRIVAL or homestay may not be arranged. Please complete the form by typing in your answers, print the form, and sign it. Then scan and email completed form to SAS at deakin@student-accommodation.com.au. For more information call +61 3 9485 1900.

Please indicate who your first course w	DUELI	De	rakin University			
and your campus of study Melb	oourne Burwood	Geelong Waterfront	Ge	elong Waurn Ponds		
Student details						
Title (Dr, Mr, Mrs, Ms, Miss, Mx)		Family name				
Given name(s)		Preferred name				
Date of birth (day/month/year)	Male Female Unspecified					
Nationality	Religion					
Course start date (day/month/year) / /		Expected length of stay in homestay				
How do we contact you?						
Your telephone	Your email					
Agent name						
Agent telephone	Agent email					
Name of parent or legal guar	dian in home country (st	udents under 18 years of age	only)			
Name						
Business telephone		Mobile				
Home telephone		Email				
Nominated care agency in Au	ustralia (for students under 18	years of age only)				
Arrival details				J		
Do you require airport reception on arrival? (Airport reception is COMPULS	No. Please provide you	No. Please provide your expected date of arrival at the homestay / /				
for students under 18)		Yes. Please fill in your arrival information below				
Departure from home		Arrival in Melbourne				
Flight Number	Airline	Flight Number		Airline		
Date / /	Fime of departure	Date / /		Time of arrival		
Homestay preference						
Single-room Will you accept other stude		idents in the homestay?	Yes	No (choice of homestay may be limited)		
With children Without children			Either			
Any dietary requirements? No	Yes. Please specify what you	ı cannot eat.	1			

Dislike

Smoker:

Medical conditions

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Do you have any med	ical condition/disability that we need to know about to provide for your wellbeing?				
No	Yes. If yes, then describe				
Allergies:					
No	Yes. If yes, please state your allergies				
Medication taken:					
No	Yes. If yes, please state your medication/s				
Please write any specia	requests you wish to be taken into account for your homestay application:				
Homestay fees arThe minimum staYou must give oneIf you wish to takeIf you are under 1	ns and conditions a payable two weeks in advance and the first payment is due on arrival at the homestay. y is two weeks and this is non-refundable. week of written notice before leaving the homestay or you will still need to pay the weekly for a holiday and return to the same homestay, a holding fee of A\$105 per week applies and it is 8, any requests for changes to your homestay arrangements must be made by your parents at may be terminated.	s payable in		by Deakin Ur	niversity
Authority of pa	arent or legal guardian (for under 18 year old students only)				
1	(name in English capital letters), being	the parent/	guardian d	of the applica	nt
hereby accept final	ncial responsibility related to fees payable by him/her.				
Signature in English					
Signature in own lan	guage	Date:	/	/	
Signed by stud	ent erstood the Homestay Information Sheet and I agree to the conditions of homestay as outline	ed above.			
Signature in English					
Signature in own lan	guage	Date:	/	/	

Please note that fees are correct at the time of printing but are subject to change without notice.