



HOLY SPIRIT CATHOLIC SCHOOLS **STUDENT HOMESTAY APPLICATION**

Holy Spirit Catholic School Division
620 12B Street North
Lethbridge, AB T1H 2L7



STUDENT INFORMATION

Please print clearly.

Family Name(s):		First Name & Middle Name:	
English Courtesy Name(s):		Gender: Male: _____ Female: _____	
Home Address:		City:	
State:	Country:	Postal Code:	
Home Telephone:	Cell Telephone:	Student Email:	
Student Birthdate: Year: _____		Month: _____ Day: _____ Age: _____	
Passport Number:		Expiry Date:	
Current School Attending:		Current Grade:	
How long do you plan to study in Holy Spirit Catholic Schools?			
Arrival Date:		Departure Date:	
Father's First Name:	Father's Last Name:	Mother's First Name:	Mother's Last Name:
Father's Birthdate:	Father's Telephone:	Mother's Birthdate:	Mother's Telephone:
Father's Email:		Mother's Email:	
Emergency Contact in Home Country if Family Cannot be reached:			
Name:		Phone: _____ Email: _____	

INFORMATION FOR THE HOMESTAY FAMILY

Have you ever traveled to Canada before?	YES	NO
Do you have any serious allergies that may affect our choice of Homestay Family? Explanation and Medication: (animal/food/plant allergies)	YES	NO

Do you require a special diet? Please explain:	YES	NO
Do you have any medical or health concerns (ex. Asthma or ADHD)? Please explain and list any medications:	YES	NO
Have you received all necessary vaccinations to attend school in Canada? Please send an English copy of your list of vaccinations.	YES	NO
In which activities do you participate? (Check all that apply) <input type="checkbox"/> Reading <input type="checkbox"/> Dance <input type="checkbox"/> Music <input type="checkbox"/> Travel <input type="checkbox"/> Cooking <input type="checkbox"/> Computer <input type="checkbox"/> Fitness <input type="checkbox"/> Art <input type="checkbox"/> Theatre <input type="checkbox"/> Hiking <input type="checkbox"/> Skiing <input type="checkbox"/> Basketball <input type="checkbox"/> Soccer <input type="checkbox"/> Swimming <input type="checkbox"/> Volleyball <input type="checkbox"/> Skating <input type="checkbox"/> Golf <input type="checkbox"/> Curling <input type="checkbox"/> Fishing <input type="checkbox"/> Camping <input type="checkbox"/> Watch Movies		
Do you attend Church? If so, which religion?	YES	NO
Please make a list of your favorite school subjects:		
Please describe your family:		
What do you hope to see, do and learn while you are attending school in Canada?		

How fluent is your English? Please check.

Listening:	<input type="checkbox"/> Advanced	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Basic
Reading:	<input type="checkbox"/> Advanced	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Basic
Writing:	<input type="checkbox"/> Advanced	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Basic
Speaking:	<input type="checkbox"/> Advanced	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Basic

We will do our best to find you the ideal family. We choose families who enjoy hosting an international student because of the cultural experience. Is there anything that you would like to tell us with respect to our selection of a Homestay Family for you?

English Message to Your Canadian Homestay Family

Dear Canadian Family:

(Please send us a few photos of yourself and your family to the e-mail address below.)

If you have any questions, please write to me at:

Homestay@holyspirit.ab.ca

I am looking forward to meeting you.

Kendra Rolheiser

Holy Spirit Catholic Schools

620 12 B Street North

Lethbridge, AB T1K 6R9

(403) 327-9555