



**HOLY SPIRIT CATHOLIC SCHOOLS
STUDENT HOMESTAY APPLICATION**



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

STUDENT INFORMATION

Please type information.

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:	___ Advanced	___ Intermediate	___ Basic
Reading:	___ Advanced	___ Intermediate	___ Basic
Writing:	___ Advanced	___ Intermediate	___ Basic
Speaking:	___ Advanced	___ Intermediate	___ 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:

Package Checklist - make sure you have done or included the following:

Application Forms

Birth Certificate or Passport Copies

School Transcripts

Two Reference Letters

Cover Letter indicating your reasons to participate in an exchange

Medical Forms

If you have any questions, please write to me at:
urquhartw@holyspirit.ab.ca

I am looking forward to meeting you.

Wendy Urquhart
French Language & International Education Consultant
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