

Section 1 - Student details

International Student Number (if known):

Date of birth: (DD/MM/YYYY)

Given name:

Family name:

Overseas address:

Australian address (if available):

Phone:

TAFE NSW campus location:

Email address:

Medical Conditions and Allergies:

(medical certificates may be requested)

- | | | |
|---|-----|----|
| 1. Do you have any medical conditions? | Yes | No |
| If yes, provide details: | | |
| 2. Do you take any medicines? | Yes | No |
| If yes, provide details: | | |
| 3. Are you allergic to animals/plants/foods (e.g. nuts, seafood, dairy, gluten)? | Yes | No |
| If yes, provide details: | | |
| 4. Do you suffer from any allergies such as hayfever, skin condition or other? | Yes | No |
| If yes, what type of reaction does your allergy cause (e.g. rash, swelling, anaphylaxis)? | | |
| Provide details: | | |

Dietary Requirements:

1. Do you have any special dietary requirements?
- | | | | | | |
|------------|--------|-------|-------|-------------|------------------------|
| Vegetarian | Kosher | Halal | Vegan | Gluten Free | Other (please specify) |
|------------|--------|-------|-------|-------------|------------------------|

2. Are there any foods that you do not eat (e.g. brussel sprouts)?

3. What are your favourite foods (e.g. Chinese, Italian, Thai)?

Preferences:

	Own Room	Shared Room
1. What type of accommodation do you require?		
2. Do you smoke?	Yes	No
3. Can you live with people who smoke outside the home?	Yes	No
4. Can you live in a household that has pets (e.g. cat or a dog)?	Yes	No
5. Can you live in a household that has young children under 5 years of age?	Yes	No
6. Can you live in a household that has children 6 years of age or older?	Yes	No
7. Are there any special requests you would like to make? If yes, provide details:	Yes	No

Student signature:

Print name:

Date:

Section 2 - Parent/Guardian details

Given name:

Family name:

Date of birth: (DD/MM/YYYY)

Relationship to student:

Address:

Email address:

Phone:

Parent/Guardian signature:

Print name:

Date:

Section 3 - Education agent details (if applicable)

Company name:

Counsellor name:

Email address:

Phone:

Section 4 - Type of welfare arrangement

The Parent must select from one of the following options:

I am nominating an eligible Relative (21 years of age or over) as a Guardian and will seek approval from the Department of Home Affairs. **(Complete Section 5 only)**

(Eligible Relatives: Parent, Step-Parent, Spouse, De facto partner, Brother, Step-Brother, Sister, Step-Sister, Grandparent, Step-Grandparent, Aunt, Step-Aunt, Uncle, Step-Uncle, Niece, Step-Niece, Nephew, Step-Nephew)

I am nominating a non-eligible Relative or a Family Friend (25 years of age or over) as a Homestay Host, to be approved by TAFE NSW. **(Complete Section 6 only)**

I am requesting TAFE NSW to arrange for a Homestay Host and Airport pick-up. **(Go to Section 7)**

Section 5 - Nominated eligible relative details

Given name:

Family name:

Date of birth: (DD/MM/YYYY)

Gender:

Nationality:

Relationship to student:

Australian Address:

Email address:

Phone:

Attachments: Please attach a copy of the Passport and Australian Visa (if applicable). Your visa must be valid until the student completes the course or until student turns 18 years of age. Bridging and Tourist Visas are not acceptable.

Note: You will be required to provide signed Statutory Declaration and Police Clearance Certificate to the Department of Home Affairs (DoHA) at the time of student's visa lodgement.

Eligible relative signature:

Print name:

Date:

Section 6 - Nominated non-eligible relative / family friend details

Given name:

Family name:

Date of birth: (DD/MM/YYYY)

Gender:

Nationality:

Relationship to student:

Australian Address:

Email address:

Phone:

Visa Status: Australian Citizen Australian Permanent Resident

Attachments: Please attach a copy of the Passport and Australian Permanent Visa (if applicable).

Property and Resident Details: House Semi-detached Unit

Number of

Bedrooms: Bathrooms: Living Areas:

Adults: Children (17 years of age or below):

Pets: Type of Pets:

In the table below, please provide details of all persons residing at the Homestay Accommodation (including the Homestay Host).

Name	Phone Number	Birth Date	Gender	WWCC Number* (if known)	Relationship to the nominated Carer

*A valid Working With Children Check (WWCC) is required for all persons over the age of 18 years who reside at the Homestay Accommodation pursuant to the Child protection (Working with Children) Act 2012 (NSW).

Declaration: I have read and agree to the Homestay accommodation requirements and my responsibilities as a nominated host on the website: tafensw.edu.au/international/why-tafe-nsw/life-in-nsw/accommodation

Non-eligible relative/family friend signature:

Print name:

Date:

Section 7 - Submit your application

- Complete this form and ensure that all relevant sections have been signed.
- Gather copies of all supporting documents requested.
- Send the completed form and supporting documents to: intadmissions@tafensw.edu.au