

Host Family Registration Form 1/6

ABOUT YOUR FAMIL	Y -
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Please complete this form and return it to: Caroline at College Guardians, College Road, Malvern, Worcestershire, WR14 3DF.

Please fill in this form if you are interested in applying to host an international student with College Guardians. This means providing a student from overseas with accommodation, meals and care whilst they study here in the UK.

1.

Your surname:

First names (please underline the name generally used):

Home address:

Valid driving licence:

Nationality

Occupation:

Religion

⊖Yes ⊖No

Date of birth (dd/mm/yyyy)			Daytime telephone:	
Gender	OMale) Female	Evening telephone:	
Valid driving licent	ce: 🔿 Yes	No		
Nationality			Email address:	
Religion			Mobile telephone:	
Occupation:				
2.				
Surname of spous	e/partner:			
First names (please	underline the na	me generally used):		
Date of birth (dd/mm/yyyy)			Daytime telephone:	
Gender	() Male	() Female		
		-	Evening telephone:	

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Email address:

Mobile telephone:



ABOUT YOUR FAMILY

3.

Please provide details of *everyone else* living in your home:

Full name:	Gender (M/F):	Relationship to you:	Date of birth:

4.

Please give details of the family's interests and hobbies:

5.

Please give details of you and your partner/spouses(s) work (paid and unpaid) and usual working hours:



HOSTING -

6.

How many students are you prepared to host at any one time?

 $\bigcirc 1$

- 02
- () 3+

7.

What age student(s) are you prepared to host? (please tick all that apply)

- 5-7 years
- \bigcirc 7–10 years
- 10-13 years
- 13-16 years
- 16-18 years
- \bigcirc 18+ years

8.

Are you happy to host a student of either gender?

- O Prefer male
- O Prefer female
- \bigcirc Do not mind

9.

Hosting options preferred (please tick)

- Short term (from 1 night to 2 weeks)
- O Medium term (from 2 weeks to 2 months)
- Long term (over 2 months)
- O Do not mind

10.

Please indicate the time(s) of year when you may generally not be available:

11.

Please provide details of previous hosting experience, if any (including dates), and why you and your family would like to host:

ABOUT YOUR HOME

12.

Please provide a brief description of your family home, including how many rooms, and how many bedrooms your home has:

13.

Details of the bedroom(s) available for hosting student(s) - please tick all that apply:

	Separate bedroom	Ensuite	Single bed	Double bed	Desk and chair
Bedroom 1	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Bedroom 2	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Bedroom 3	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

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Host Family Registration Form 3/6



Host Family Registration Form 4/6

ABOUT YOUR HOME

14.

Details of the property

Please indicate whether or not the property has the following:

Front garden:	⊖ Yes	⊖ No	
Back garden:	⊖ Yes	◯No	
Broadband intern	et connection:	⊖Yes	

15.

Are there any smokers in the home?	
Is smoking allowed in the home?	

16.

Are there any family pets in the home? (please provide details)

Has any family pet caused anyone a personal injury or been the subject of a complaint? (please provide details)

17.

Names of other temporary, permanent or international students staying at the property (please provide details including dates of stay, nationality and ages):

18.

Car Insurance

Does your car insurance cover you to drive students?

⊖Yes

Household Insurance

Does your household insurance policy cover you to host students on an occasional basis?

No

⊖Yes ⊖No

Do you have a Gas Safety Certificate for your home?

◯ No

Does your home have smoke alarms?

() yes	\bigcirc	Yes	
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○ No

oo you have a First Aid Kit in your home	?
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Does your home have carbon monoxide monitors?

⊖ Yes

◯ No

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DECLARATION AND SIGNATURE	
DECLARATION AND SIGNATORE	

19.			
Has any full-time	e resident in the household ever: (plea	ase tick Yes or No)	
Been convicted of	f any offence against a child?	Been on the list of individuals barred from working with children or otherwise disqualified to work with children, administered by the DBS or subject to sanctions imposed by any regularity body?	
⊖ Yes	No		
	he child protection register ct of a child protection plan?	⊖ Yes	
⊖ Yes	No	Been convicted o case pending?	f a criminal offence or have a court
Had a child removed from your care by order of a court?			No
		Had family court, civil court or criminal justice system incidents / appearances?	
Been denied access to or made subject of an injunction regarding your own or other children?			
⊖ Yes	⊖ No		'sex offender order', civil finding
Been disqualified from activity as a foster parent?		or injunctions (relevant to any family court matter, domestic situation child or children)?	
⊖ Yes	⊖ No	⊖ Yes	No
Been refused registration under the Children Act 1989 e.g. as a child minder?		Been subject to an emergency protection order?	
⊖ Yes	○ No	⊖ Yes	No
This position is exempt from the Rehabilitation of Offenders Act 1974 and therefore all convictions, cautions,			

YES' to any of the questions above, please supply further details along with the relevant dates on a separate form marked Private and Confidential for the attention of the Director of Guardianship Services.

Section 70a of the Children Act 1989 states that a person who gives information which he/she knows to be false/misleading or makes a statement in this notice will be guilty of an offence and liable on summary conviction to a fine.

Please note: having a criminal record nay not necessarily stop you from working with our company; this will depend upon the nature of the offence.



DECLARATION AND SIGNATURE

Data Protection: By signing this form, you are confirming that College Guardians may obtain, process and hold personal information about you and your family, including sensitive information (such as details of any convictions), and that you consent to this for the purposes of assessment.

First signature:	Second signature:		
Name in full:	Name in full:		
Date:	Date:		
Signature and full name of any family member over the age of 16 living at the address:			

Please provide details of the names of two character referees one of whom should be a professional person and must have known you for at least two years:

Name	Name	
Address:	Address:	
Telephone number:	Telephone number:	
relephone number.	relephone number.	
Email address:	Email address:	

Thank you for taking the time to complete this form.

Please note: This form is for information purposes only, and does not constitute a binding contract between you and College Guardians.

Once this information has been processed we will arrange a time to come and visit you in your home. At this time we will need to see details of household insurance certificates and gas safety certificates if applicable.

College Guardians takes the welfare and safety of children very seriously. We will undertake DBS checks for all people living in the household over the age of 16. In order to do this we will need to inspect the following documents when we visit, passport, Driving Licence and National Insurance Number. By signing this form you agree to College Guardians undertaking DBS checks and taking up references.

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