



1-3 Marlborough Place Brighton
East Sussex BN1 1UB

Telephone (01273) 671746
Facsimile (01273) 689808

Email: brighton@stgiles.co.uk
Website: www.stgiles-international.com

Homestay Host Application Form

Please complete and return to the Accommodation Office at the above address

Full name of main host			
Date of Birth		Nationality	
Profession/Occupation		Hobbies	
Spouse/Partner's name (if applicable) & date of birth			
Profession/Occupation		Hobbies	
Full postal address			
Postcode			

Home telephone		Mobile	
Work telephone		Emergency number	
E-mail			

Details of any other members of the household or regular visitors				
Name	Sex	Relationship	D.O.B	Hobbies

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Do you practise any particular religion?	Yes	No	If yes please specify	
Do any members of the house smoke?	Yes	No	If yes please specify where	
Do you have any pets?	Yes	No	If yes please specify	

Type of accommodation e.g. house	Number of student rooms			
	Room 1	Room 2	Room 3	Room 4
Approximate size				
Single room				
Twin room (2 single beds)				
Double room (1 double bed)				
Wardrobe/fitted cupboard				
Chest of drawers				
Desk or table and chair for study				
Reading/study lamp				
Other (e.g. television/private bathroom)				

How many bathrooms		How many people share the main bathroom	
Is there a shower?		Is there a bath for student use?	

Which packages would you like to offer?	Half board	Self-catering	Bed & Breakfast
Are you able to cater for special diets?	Yes	No	If yes please specify

Can students use these facilities?	Yes	No	Are there any extra charges?
Kitchen			
Washing machine			
TV			
Wi-Fi internet			

Does the house have central heating	Yes	No
Can student receive/make phone calls?	Yes	No
Are students allowed to have friends visit?	Yes	No

How long does it take to travel to school by bus?			
Name of bus stop:		Bus numbers:	
How long does it take to travel to school on foot?			
Are parking facilities available?	Yes	No	

Will you accept male students?	Yes	No
Will you accept female students?	Yes	No
Will you accept couples/families?	Yes	No

Will you accept students under the age of 18?	Yes	No
Are you willing to complete a DBS for the address?	Yes	No
Please state if there are any nationalities you would prefer not to host.		
Have you or a member of your family ever had any involvement with Children Social Services?	Yes	No
Do you host students from other schools?	Yes	No
Do you accommodate any other paying guests?	Yes	No
Will you accept students over the Christmas period?	Yes	No
Will you accept students on the long stay rate?	Yes	No
Are you willing to complete our fire risk assessment?	Yes	No
Will you accept smokers?	Yes	No
Are you willing to provide a gas safety certificate?	Yes	No
Please state any dates you are unavailable.		

Please Note: The accommodation office will endeavour to place compatible students with you on the dates you offer. It should be understood that all placements are subject to availability, and that the school cannot guarantee compatibility, continuity or regularity of student placements.

Additional information

Please give any further information you feel may help us to place the right student with you and to ensure the success of arrangements from both your point of view and the student's.

We use the BACS system (where we pay directly in to your bank account). Please fill in your bank details below so that we can arrange payment:

ACCOUNT HOLDER:

NAME OF BANK:

SORT CODE:

ACCOUNT NUMBER:

EMAIL ADDRESS:

Please provide the names and contact details of two people who can act as character references (not family members). We will contact these people. A signed written reference would be preferable.

Referee (1) Name	Contact details – Please give postal and email address
Referee (2) Name	Contact details – Please give postal and email address

St Giles International Hospitality Agreement – Acceptance

I confirm that all information I have provided is true to the best of my knowledge and belief and understand that this information may be used to place students in appropriate homes and to ensure their safety and wellbeing.

I confirm I have the permission of the referees I have provided on this form to pass their personal details to you. I understand and agree to St Giles Schools of Languages Ltd using this and other data to create and maintain records related to my homestay for the purposes of placing compatible students and for statistical purposes in accordance with the EU GDPR 2018 and for any other legal requirements and the St Giles International Data Protection Policy which can be found on the Company website. I agree that this information will be kept for the duration of the recruitment process and for a period of time thereafter. I am aware I have the right to request a copy of the data held on me.

Name of host: _____

Address: _____

Signature: _____ Date: _____

Please return to:

Accommodation Officer, St Giles International, 1-3 Marlborough Place, Brighton. BN1 1UB

OFFICE USE ONLY - Accommodation: Homestay Application Form 10/2018

Date of visit:

Time of visit:

Visited by:

Notes: