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## HOMESTAY HOST APPLICATION

|                |     |             |
|----------------|-----|-------------|
| Street Address |     |             |
| City           |     | Postal Code |
| Home Phone     | Fax | Email       |

**MOTHER**

|  |             |               |  |
|--|-------------|---------------|--|
| Surname  |             | First Name    |  |
| Place of Work <span style="float: right;">__ Full Time __ Part Time</span> |             |               |  |
| Work Phone   | Cell Number | Email Address |  |

**FATHER**

|  |             |               |  |
|--|-------------|---------------|--|
| Surname  |             | First Name    |  |
| Place of Work <span style="float: right;">__ Full Time __ Part Time</span> |             |               |  |
| Work Phone   | Cell Number | Email Address |  |

**OTHER OCCUPANTS OF YOUR HOUSEHOLD**

| Last Name (if different from above) | First Name | Relationship | M/F | Age |
|-------------------------------------|------------|--------------|-----|-----|
|                                     |            |              |     |     |
|                                     |            |              |     |     |
|                                     |            |              |     |     |
|                                     |            |              |     |     |

Gray Academy of Jewish Education Homestay families must support the student including commitment to Jewish education.

**Gray Academy requires all Homestay Parents to submit a Criminal Record check (\$30 per person) and a clearance from the Child Abuse Registry (\$10 charge per person).** Forms are available from the Director of Advancement or Head of School and only need to be submitted when this application is approved and a match with a student is made.

Every Homestay family is responsible for informing the *Gray Academy International Student Program* of any change in status of the family.

How long would you like to host a student in your home?

- Full School Year (10 months)  Short term (less than 10 months)
- Other \_\_\_\_\_

1. Please provide a brief description of your family's hobbies and interests:

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2. Do you attend synagogue weekly? If so, which one? \_\_\_\_\_

Would you feel comfortable hosting a student who has a different degree of religious observance from that practiced in your household?  Yes  No

3. Do you have any pets? Please list: \_\_\_\_\_

4. What is the primary language spoken in your home? \_\_\_\_\_

5. Does anyone in your home speak a language other than English?  Yes  No

If yes, please describe: \_\_\_\_\_

6. Would you be willing to assist a student with homework?

- Yes  No

7. Please describe a typical family weekday routine:

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8. What is your student gender preference?  Male  Female  No Preference

9. How does your family usually spend the weekend?

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10. What high school age would you prefer? Grade:  9  10  11  12  No Preference

11. Are you willing to take more than one student?  Yes (how many) \_\_\_\_\_  No

12. Are you willing to host a student with special dietary needs (e.g. religious restrictions, vegetarian, etc.)?  Yes  No

13. Does anyone in your home have a medical or physical condition that may impact hosting responsibilities?  Yes  No (If yes, please describe) \_\_\_\_\_

14. Please describe specific family rules that children in your home must follow:

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15. Why do you want to host an international student?

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16. What are your expectations from this experience?

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17. How did you hear about our program?  School email/newsletter  Newspaper  
 Friend/relative  Other (please describe) \_\_\_\_\_

18. Have you ever hosted an international student in the past?  Yes  No  
 If yes, when & for how long: \_\_\_\_\_

19. When will your home be ready for a student?  Now  Date: \_\_\_\_\_

20. About your home:

Apartment/Condo     Single family dwelling     Other: \_\_\_\_\_

How many bedrooms do you have available? \_\_\_\_\_

Where are they located in the home?     Upper Level     Lower Level     Main Floor

How many bathrooms do you have? \_\_\_\_\_

Will the student have his/her own private bathroom?     Yes     No

Which of the following do you have?     Smoke Detector (required)     Fire

Extinguisher(s)

21. How would the student get to school and how many minutes will it take? Distance: \_\_\_\_ km

Walking \_\_\_\_ minutes     Driving \_\_\_\_ minutes     City Bus \_\_\_\_ minutes

22. Full Year International Students **must have a room of their own.** Please describe the student's room:

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23. Please feel free to share any additional information about your family that you feel would be helpful to us.

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24. Please list two references who know your family very well. Gray Academy administration will be the only people contacting your references.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_