

International Student Application for Homestay 2018-2019

A. Accommodations and Oversight

The following will be provided for a homestay student:

- o A private or shared bedroom. (A shared bedroom would be with the same gender as the student and only if the international family prefers it).
- o Meals and snacks not provided through the school lunch program will be provided by Host Family.
- o Transportation will be provided or arranged to and from school and all school related activities.
- o Adult oversight will be provided or arranged by Host Parents for the entirety of the students stay.
- Willingness for the homestay family to serve as the student's guardian unless the international family has made other arrangements.
- O Accommodate, within reason, any unusual requests or needs that the international student has. The reasonableness of a request will be determined at the sole discretion of the International Program Director. For example, if the international student has a particular allergy, it would be within reason for the Host Family to do everything possible to eliminate or minimize contact with the allergen. However, if the issue cannot be reasonably resolved and the rhythm of the Host Family would be significantly altered (e.g. needing to give up a family pet), the student will be relocated.

B. Guardianship

Guardians are responsible to provide reasonable care to assure the safety and well-being of the student. They also act as liaison between the school, family, and host family to make sound decisions concerning the health and medical care of the student. This guardian will work closely with the school to oversee the academic progress of the student. Having a guardian also provides you with a place to stay when school is not in session for more than one week when you might not want to travel home. Host Parents may be asked to act as your guardian if one has not been arranged by your parents. As a guardian, your Host Parents will work closely with your parents, the placement agency and the International Program Coordinator to make all major decisions concerning your care, especially those relating to your medical needs. Host Parents may choose to use their own medical practitioners or ones that the school recommends. Students are expected to have their own medical and accident insurance and will be responsible for any co-pay or other expenses not covered by their insurance policy.

C. Homestay Period

The Homestay period will begin at least one week before the start of the school year and extend to at least one week after the last day of school in the spring (different arrangements can be made by mutual consent of the parties involved). If you have a guardian, you should consider staying with him or her for any breaks that are one week or longer and you are not returning home. For the 2018-2019 school year the homestay period lasts from August 26, 2018 – June 17, 2019.

D. What is Expected of You

Your Host Family has chosen to welcome you as a guest into their home and to treat you as a member of their family. As a member of the CCA Homestay Program, we expect you to be respectful and considerate, to abide by the house rules (which may vary from one home to another) and to respectfully communicate any concerns you have with your Host Family. You may inform your guardian, your parents, your placement agency, or the International Program Coordinator if you feel your expressed concerns are not being addressed. But we expect you to first address your concerns and seek resolution with your host family prior to contacting others. If you need help with navigating a problem, the International Program Coordinator will be available and eager to help you.

E. Disclaimer: This Homestay disclaimer applies to all participants in this homestay program including hosts, applicants, students and families of international students. I/We have read and understand the Homestay Contract and the Mutual Agreement between CCA Host Family and Family of International Student.

I/We understand that Covenant Christian Academy (CCA) including all school services, administrators, and employees are acting as independent agents who are not guaranteeing the quality of the relationships between the Homestay student and the Host Family or between student and the educational institution or other relationships.

I/We understand and assume any and all risks related to my participation in this program, and I/We agree to release and hold harmless CCA and each of its respective employees, agents, and representatives from any and all liability of claims should any injury, loss, or damage occur during this homestay or any other service offered.

I/We understand that if I/we participate in this program that I/we will purchase my own insurance whether medical, emergency, liability, damage, home, vehicle and/or any other types of insurance which many be necessary, should any claims, damages or penalties arise. Please contact your insurance broker, travel agent, or insurance provider for more details.

F. International Student and Family Information

Mother			Father		
Name:			Name:		
Address:			Address:		
Occupation:			Occupation:		
Telephone (h)			Telephone (h)		
(w)			(w)		
(c)			(c)		
e-mail:			e-mail:		
Emergency contact:			Emergency contact:		
Name:			Name:		
Number:			Number:		
International Student and siblings: Name	Age/DOB	Current Grade	Grade applying to	Hobby	
Me:					
1.					
2.					
3.					

If yes, please explain:	g eise it would be important for	your nost family to know	about: lyes lno
What are you most excited about when you think about	nt the homestay program?		
What are you most nervous about when you think of t	he homestay program?		
Have you been in a homestay program before? If so,	what was it like?		
	apply to CCA's Homestay Pr	ogram for the 2018-2019	academic year.
Student's Name I understand what is expected of me as a guest in my	, ,		
their family, their house rules and their property. I provide direction and guidance in order to ensure m	y safety, wellbeing and acade	mic progress. I understa	nd that it is
essential for me to cooperate with them in all matter have read and agree to abide by the disclaimer (Sec the expressed expectations for being a student at CC	tion E) as written on this appli	ication. I understand tha	ıt my disregard oj
my relationship with my Host Family and Covenant		siay Frogram wili resuli i	in termination of
Print your name (International Student)	Signature	date	-
Print your name (International Parent 1)	Signature	date	-
Print your name (International Parent 2)	Signature	date	-
Thank you for applying. Please re	eturn the completed form in or	n eof the following ways:	
• Scan and	e-mailing to admissionint@cc	amail.org	
•	Fax it to 978-535-7123		

• Mail to Covenant Christian Academy