

CAMBRIDGE COLLEGE

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CAMBRIDGE COLLEGE
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HOMESTAY / AIRPORT RECEPTION APPLICATION FORM

1. Personal Information

Family Name:	First Name (s):	
Date of Birth (MM/DD/YY):	Place of Birth (City / Country):	
Citizenship:	Passport Number:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Native Language:	Other Languages:	
Status in Canada: <input type="checkbox"/> Visitor <input type="checkbox"/> Study Permit <input type="checkbox"/> Work Permit <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other _____		
Full Address in Home Country: Street: _____		
City: _____ State: _____ Country: _____ Zip Code: _____		
Telephone Including Area Code: _____	e.mail: _____	
Emergency Contact Information: Name: _____ Relationship: _____		
Telephone Including Area Code: _____ e.mail: _____		

2. Your Requirements

Do you need accommodation (minimum 4 weeks)? YES NO

Number of weeks in Homestay: _____ Do you want: HOMESTAY(WITH MEALS) ROOMING (NO MEALS)

Accommodation Start Date (DD/MM/YY): ____/____/____ Accommodation End Date (DD/MM/YY): ____/____/____
* STUDENT MUST INITIALLY PAY THE PLACEMENT AND FIRST MONTH HOMESTAY FEE. FEES FOR REMAINING DURATION MUST BE PAID ON START DATE.

Do you have any allergies or medical conditions that Cambridge College should know in case of an emergency? NO YES. If YES, Please specify _____

Do you take any medication? NO YES If YES, Please specify _____

Are you vegetarian / special diet? NO YES I cannot eat certain foods: _____
My favorite foods are: _____

Do you smoke? NO YES * If Yes, you may required to smoke outside Can you live with other smokers? YES NO

What languages do you speak? _____

Level of English: Beginner Intermediate Upper Intermediate Advanced

Do you want a family with: Young children YES NO Teenagers YES NO Other Students YES NO
Cat YES NO Dog YES NO Other Pets YES NO

3. Arrival Information

PLEASE SEND FLIGHT DETAILS AT LEAST ONE WEEK IN ADVANCE

Do you need airport Reception? YES NO Do you need airport Drop-Off? YES NO

Date of Arrival: ____/____/____ Time of Arrival: (24 HOUR TIME FORMAT) ____:____:____

Name of Airline: _____ Flight Number: _____ Connecting City: (if any) _____

4. Personal Interest

Please list your interest or hobbies: (music, sport, etc.) _____

Is there any other information that you would like to tell us? _____

I understand that the Cambridge College Homestay Services will select a Host family from those available, based on the information that I have provided and that they cannot guarantee that any of my personal preferences will be met. I have also read and understood the Homestay and Airport Reception cancellation policies. I have enclosed payment for services requested (CAD \$195 Homestay Placement Fee and CAD \$145 Airport Reception/ Pick-up Fee)

Amount Paid _____

STUDENT NAME: _____ STUDENT SIGNATURE: _____ DATE: _____