

**PRIVATE HOMESTAY ACCOMMODATION OUTSIDE THE  
MASSEY HIGH SCHOOL SYSTEM**

(Designated Caregivers may only be relatives or very close friends of family)

<b>Student's Family Name</b>																				
<b>Given Name</b>																				

**Address :** .....

.....

**D.O.B** ..... **Male**  **Female**       **Mobile:** .....

**Phone :** ..... **Fax:** ..... **E-mail:** .....

<b>Mother's Family Name</b>																				
<b>Given Name</b>																				

<b>Father's Family Name</b>																				
<b>Given Name</b>																				

**Address :** .....

.....**Mobile:** .....

**Phone :** ..... **Fax:** ..... **E-mail:** .....

<b>Agent's Family Name</b>																				
<b>Given Name</b>																				

**Address :** .....

.....**Mobile:** .....

**Phone :** ..... **Fax:** ..... **E-mail:** .....

The address will be given to the Director of International Students at Massey High School to enable Massey High School to carry out the necessary checks. If there is a need to change accommodation, the student and the designated caregiver must follow the school policy and inform the Homestay Manager, and ensure that these people are close friends or relatives of the student's parents. The student's parents must complete the necessary forms and sign them. All checks have to be completed by the school and the move has to be approved before the student can move. Students cannot make their own home stay arrangement, as this has to be organized through the school.

Agent Sign.....

Date : .....

<b>Caregiver 1</b>																				
<b>Family Name</b>																				
<b>Given Name</b>																				

<b>Caregiver 2</b>																				
<b>Family Name</b>																				
<b>First Name</b>																				

**Address :** .....

**Relationship to student :** .....**Mobile:** .....

**Phone :**.....**Fax:**.....**E-mail:** .....

**DETAILS OF OTHER PEOPLE LIVING AT ABOVE LOCATION OR REGULAR VISITORS TO THE HOME OVER THE AGE OF 18**

<b>NAME</b>	<b>D.O.B</b>	<b>GENDER</b>	<b>OCCUPATION</b>

**Total number of people (including children) living at this address:**

**APPROVED SCHOOL TRIPS**

I will allow my son/daughter to participate in any approved, supervised school activities  
 Yes  No

I ..... (Mother/Father) of ..... (Student) agree to allow our Son/Daughter to live in the above accommodation. I also designate .....(Guardian) to fulfil guardianship responsibilities for my Son/Daughter while he/she is a student at Massey High School, and agree that we, the parents, take full responsibility for the placement and ongoing welfare of our son/daughter.

**IF STUDENTS CHANGE HOMESTAY ACCOMMODATION THIS WILL INCUR A FURTHER CHARGE OF NZ\$300 TO COVER THE COSTS OF HOUSE INSPECTION ETC.**

Students **MUST** inform Massey High School of any changes **PRIOR** to them moving so that all necessary checks can be completed before they move. Failure to inform the school will result in the student not being allowed to attend until all necessary checks have been made.

I/we understand that the school will:

- Visit the home of the designated caregiver prior to enrolment to determine that the living conditions are of an acceptable standard.
- Assess whether the designated caregiver will provide a safe physical and emotional environment for the student.
- Determine that the accommodation is not a boarding establishment (i.e. does not have 5 or more international students staying in the home)
- If the accommodation selected by the parents is a boarding establishment, the school will follow the provisions relating to boarding establishments as set out in the Code of Practice.
- Meet with the designated caregiver/s and establish communication with the caregiver.
- Meet the student at least quarterly to ensure the accommodation is suitable.
- May require a Police vet to be undertaken, if the school considers it appropriate.

Should this arrangement change I/we undertake to inform *Massey High School* immediately. Further, I/we understand that should *Massey High School* have any concerns regarding the welfare of my/our child, they may refer him/her to the relevant welfare authorities, or any other appropriate agency in New Zealand.

I/we understand that *Massey High School* will make every endeavour to ensure the safety and welfare of my/our child while studying in their school.

**DECLARATION:**

I/we confirm that the person/s selected as the designated caregiver/s is/are a 'bona fide' relative or close family friend.

Mother Sign ..... Father Sign .....

Date: .....

Please fax back to 0064-9-833-9200

“Massey High School Board of Trustees has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the Minister of Education. Copies of the Code are available on request from this institution or from the New Zealand Ministry of Education website at <http://www.minedu.govt.nz>”