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HOMESTAY APPLICATION

Please complete this form only if applying Home stay placement.

Signature: ___

Personal Information			
First Nan	e: Last Name:	Male	Female
Birth date	: Year MonthDay Nationality: First Lang_		
Type of	visa: Visitor Student Working Holiday Other Expi	ry date	
Email add	ress:		
Mailing Address in Home Country			
Number/S	treetCity	Province_	
Country	Postal code Phone numberFax num	ber	
Emergency contact name, phone, e-mail, others			
Personal Details			
English Speaking Ability Beginner Lower Intermediate Upper Intermediate Advanced Do you smoke? Yes () / No () Are you vegetarian? Yes () / No () Do you have any foods you cannot eat? Yes () / No () Do you have any allergies? Yes () / No () Do you have medicine that you take regularly?Yes () / No () Do you like animals? Yes () / No ()			
Personality Characteristics () Outgoing / () Shy / () Independent / () Quiet / () Sociable / () Optimistic / () Cheerful / () Serious / () Talkative / () Artistic / Athletic			
	ay Period Begin Year Month Date / End YearMonth_	Date_	
Airline Arrival Information			
Date you arrive: Airline, Flight number and Time of Arrival			
Do you want to airport pick up? Yes () / No ()			
We will try to accommodate your preferences, however your choices are not guaranteed, please remember any changes to this application or cancellation of arrangements requested are subject to Britannia college refund policy. * Placement fee \$200 Non-Refunded. The fee refunded only if notice of cancellation is in writing and received 30 days prior to the session start date. * 100% refund if visa denied. Written proof must be provided from the Canadian Embassy or Consulate, which indicates that the visa application has been denied or the visa issuance postponed. * 75% refunded if cancellation is received in writing 14 days or less prior to session start date. I declare that the information I have given is correct and accurate. I understand that while effort will be made to math all of my requests,			
no guarantee can be given to mach each one. I have and understand refund policy.			

Date:_____