

Lethbridge School District No. 51
International Services



Lethbridge School District No. 51
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Lethbridge, Alberta, Canada
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www.internationalservices.lethsd.ab.ca

District Form: 501.7.7

**Section 1: Application for Short-Stay Students
for Lethbridge School District No. 51**

(Look for the data fields that have drop-down menus to simplify your entries)

Last Name (Family)	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>		
Name you prefer to be called	<input type="text"/>	Birthdate	<input type="text"/> Year, Month, Day	Age	<input type="text"/>	Gender	<input type="text"/>
Passport Number	<input type="text"/>	Passport Expiry Date	<input type="text"/>				
Mailing Address (Street or Box)	<input type="text"/>						
City	<input type="text"/>	Province/State	<input type="text"/>				
Country	<input type="text"/>	Postal/Zip Code	<input type="text"/>	Telephone	<input type="text"/>		
Student's Email	<input type="text"/>						

Parent Information

Father's Last Name	<input type="text"/>	First Name	<input type="text"/>	Occupation	<input type="text"/>
Father's Birthdate	<input type="text"/> Year, Month, Day	Father's Email	<input type="text"/>	Who has legal custody of you?	<input type="text"/>
		Father's Phone Number	<input type="text"/>		
Father's Mailing Address (Street or Box)	<input type="text"/>				
City	<input type="text"/>	Province/State	<input type="text"/>		
Mother's Last Name	<input type="text"/>	First Name	<input type="text"/>	Occupation	<input type="text"/>
Mother's Birthdate	<input type="text"/> Year, Month, Day	Mother's Email	<input type="text"/>		
		Mother's Phone Number	<input type="text"/>		
Mother's Mailing Address (Street or Box)	<input type="text"/>				
City	<input type="text"/>	Province/State	<input type="text"/>		

Education

Current grade level	<input type="text"/>	How fluent are you in English?	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Name of School	<input type="text"/>	Last mark/grade you received in an English Class	<input type="text"/>		

Section 2: Medical Insurance

International students must purchase medical insurance through our school district. Our group insurance covers sickness and accidents including: prescriptions, emergency dental, emergency medical evacuation, emergency family transportation, trips outside of Canada, doctor's visits, ambulance, repatriation.

Insurance rates and detailed information regarding the coverage provided are available on our International Services website.

Arrival Date? Departure Date? Name of Family Doctor

Name of Clinic in Home Country Phone

List any physical handicaps or medical conditions

Yes, I have an allergy to pets What type of pets?

Yes, I have an allergy to foods What type of food?

Yes, I have an allergy to medications What type of medications?

If you will be staying with friends or family, please check here, and do not complete the Homestay Application Information (Section 3)

Section 3: Homestay Application Information

Tell us about yourself by marking the words that best describe you:

- curious neat serious out going adventurous messy friendly
- talkative sophisticated fun open-minded nature loving thoughtful competitive
- cautious active independent intellectual humorous organized quiet
- family oriented energetic shy enjoy reading enjoy children enjoy pets enjoy computers
- enjoy dancing enjoy traveling enjoy swimming enjoy shopping enjoy school enjoy sports enjoy movies
- I will be bringing my own laptop I have been to Canada before I have lived away from home before

Regular religious attendance is important to me Which denomination?

List your favorite hobbies:

List your favorite foods:

List your favorite movies:

Tell us about your family by marking the words that best describe them:

- strict artistic modern independent adventurous international friendly
- affectionate casual traditional religious nature loving academic competitive
- active home-oriented social relaxed humorous Other

List your family members (Information for your homestay family):

Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>	Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>
Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>	Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>
Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>	Name	<input type="text"/>	Age	<input type="text"/>	Relationship	<input type="text"/>

Alternate Emergency Contact if parents unavailable:

Last Name	<input type="text"/>	First Name	<input type="text"/>		
Relationship to you	<input type="text"/>	City	<input type="text"/>	Phone	<input type="text"/>
Province/State	<input type="text"/>	Country	<input type="text"/>	Postal/Zip Code	<input type="text"/>
Email	<input type="text"/>	Fax	<input type="text"/>		

Section 4: Signatures of Student Applicant and Parents

I understand that information I have provided on this homestay application form will be used to find the best possible homestay family for me. I agree that Lethbridge School District 51 and Lethbridge Homestay Services cannot guarantee that all of my personal preferences will be met. I also agree that priority placements will be made for students who have true allergies or other restrictive conditions that may require special consideration. I am aware that I must abide by all rules and regulations as stipulated by Lethbridge School District 51 and Lethbridge Homestay Services or I may be sent home at my own expense. Further, I authorize Lethbridge School District No. 51 and Lethbridge Homestay Services to release the information on this homestay application form to my homestay family. I understand that my preferences for homestay qualities are preferences only, and my requests may not all be met.

I agree to indemnify and hold harmless Lethbridge School District No. 51 and Lethbridge Homestay Services, their elected officials and officers, employees, agents, volunteers and representatives, or any of them, from any claims, demands, expenses, costs (including legal costs), suits, debts, liabilities and causes of action for which they may become liable as a result of any personal injury or property damage that I, the parent or the student cause or contribute, or are held responsible for, jointly or severally, in connection with the student's participation in study in Canada, including a homestay placement and from any financial obligations the student may incur.

Furthermore, I certify that all information provided on and within this application is complete, factually accurate and honestly represented. I further understand that the information furnished on this application, together with information and materials of any kind received by Lethbridge School District No. 51 International Services from any source becomes the property of Lethbridge School District No. 51 International Services and cannot be returned.

Signature of Student Applicant: _____ Date: _____

Signature of Parent(s)/Guardian: _____ Date: _____
(Father's signature)

(Mother's signature) Date: _____

Section 5: Application Package Checklist

- I have completed all questions on the application form.
- I have included a letter written by me to introduce myself and my family to my homestay family.
- I have included two photos for my homestay family.