

Viewbank College,  
Warren Road, Viewbank, 3084

Department of Education and Training  
CRICOS Provider Code 00861 K

**PROSPECTIVE HOMESTAY PROVIDER  
ENQUIRY FORM**

**PLEASE NOTE THAT UNDER NO CIRCUMSTANCES WILL WE PLACE A STUDENT IN A HOMESTAY WHERE SMOKING TAKES PLACE.**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

OCCUPATION: \_\_\_\_\_

MOBILE PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ARE YOU AN AUSTRALIAN CITIZEN? YES/NO

VISA NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

PASSPORT NUMBER: \_\_\_\_\_ EXPIRY DATE: \_\_\_\_\_

If you have an existing working with children check card you will need to add Viewbank College as an organization \*\*\*  
\*\*\* working with children check organization update instructions are attached to this email.

**YOURSELF AND OTHER PEOPLE (INCLUDING CHILDREN) LIVING IN THE RESIDENCE**

NAME	AGE	GENDER	RELATIONSHIP TO HOMESTAY PROVIDER	WWC/MT?? Y/N	OCCUPATION

OTHER INTERNATIONAL STUDENTS CURRENTLY RESIDING IN HOME?

NAME	AGE	GENDER	SCHOOL CURRENTLY ATTENDING	NATIONALITY	LENGTH OF STAY

TYPE OF RESIDENCE            house            apartment            flat

Approximate distance from residence to Viewbank College \_\_\_\_\_

Experience in providing homestay? YES/NO

Type of pets (if any): \_\_\_\_\_

Languages spoken in the home: \_\_\_\_\_

REFEREES: Please nominate two people (colleagues, family friends, employers) who will be able to support your application to provide appropriate homestay for a student.

Name	Relationship	Contact details

Thank you for your enquiry.

As you would expect, there are strict requirements for the provision of homestay. We will follow up this enquiry and arrange to meet you to go through the program.

Please return this form to us at your earliest convenience or email any questions you might have at this stage.

[Kaye.Mackenzie@education.vic.gov.au](mailto:Kaye.Mackenzie@education.vic.gov.au)

[Jeanette.Maxwell@education.vic.gov.au](mailto:Jeanette.Maxwell@education.vic.gov.au)