

Queensland Government Schools
DOCUMENT A - CONFIDENTIAL
SCHOOL USE ONLY

IMPORTANT INFORMATION:

For the purpose of risk management, this document should be used and comply with the Department's [Conducting Home Visits Procedure](#) and align with the [DEi Incident Management Procedure](#).

Any changes to the homestay situation (such as a change of address or renovations) will require another inspection to be conducted.

1. FAMILY DETAILS

Family surname: Host Parent #1 name:

Address: Host Parent #1 occupation:

..... Host Parent #2 name:

..... Host Parent #2 occupation:

Emergency contact number:

Contact email:

Dietary Practices (eg. Vegetarian):

.....

Religious/Spiritual Practices:

.....

Other languages spoken at home:

.....

Family Pets:

Where are the pets kept:
 Indoors Outdoors Both

Any additional comments:

Does anyone in your family smoke:
 No Yes, indoors Yes, outdoors

Additional resident details. Details of all other individuals residing* in the home (please disclose any other international students staying in the home):

Name	Relationship	M/F	DOB	Occupation/interests.

*Please notify school immediately of any changes to household residents

Transport	Method	Time	Who will accompany student(s)?
To school			
From school			

Before and after school supervision arrangements:

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CHECKLIST FOR SCHOOL USE ONLY

Annual Home Inspection by:

Inspection Conducted on:

(DD/MM/YYYY)

- DEi Incident Management Procedure reviewed
- Conducting home visits procedure reviewed
- Family Details
- Pets
- Smoking arrangements confirmed
- Additional family members
- Transport details
- Care details confirmed

2. BLUE CARDS AND EXEMPTION CARDS

Family Member	Name	Blue Card number	Expiry Date
Primary Caregiver			
Secondary Caregiver			
Additional family member over 18 years			
Additional family member over 18 years			

If there are no Blue Card holders, have applications been lodged?

Yes* No

*If yes, what was the date of lodgement:

Blue Card Application Numbers:

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3. HOSTING PREFERENCES & ACCOMMODATION DETAILS

Hosting preferences:

Male Female No Preference

Preferred placement type:

Single Double and/or Triple

Number of students that can be accommodated:

One Two Three

Will the visiting student(s) have:

Their own room A shared room*

*If shared, please provide details:

Do you have smoke alarms?

Yes No

Do you have a pool?

Yes* No

Do you have a trampoline?

Yes* No

*Please refer to high risk/prohibited activities list

Homestay Provisions

Bedroom cleaning/tidying:

Host family will do

Visiting student will do

Washing/ironing:

Host family will do

Visiting student will do

Using the home phone:

Ask before using

Reverse charge calls only

Using the internet:

Ask before using

Any time No downloads

Any rules regarding mobile device usage:

.....

Any other household rules:

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Does your family engage regularly in any activities with a risk factor? (eg, boating, horse riding, etc):

Yes* No

*If yes, please describe.....

Blue Card or exemption card sighted in presence of card holder and photo identification

Hosting preferences confirmed

Bedroom(s) and bedding sighted

Smoke alarms confirmed
 Pool fencing confirmed
 Trampoline and swimming restrictions discussed

Household rules confirmed

Prohibited activities list discussed with family

4. FURTHER INFORMATION

Are you willing to attend orientation and information sessions to the best of your ability, as required?

Yes No

Do you consent to having your name and contact details circulated to other host families during the study tour?

Yes No

Any further information?

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School orientation session requirements discussed with family

5. FOR SCHOOL USE ONLY

General comments:

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Overall assessment:

Suitable Unsuitable

CONTACT DETAILS

Education Queensland International
Group Study Tours

STREET ADDRESS

Floor 18
Education House
30 Mary Street
Brisbane QLD 4000
Australia

POSTAL ADDRESS

PO Box 15050
City East
QLD 4002
Australia

EMAIL

StudyTours.EQI@qld.qld.gov.au

WEBSITE

eqi.com.au/study-options/study-tours

CRICOS PROVIDER NAME

Department of Education
trading as Education
Queensland International

CRICOS PROVIDER CODE

00608A