

JUNIOR APPLICATION FORM

STUDENT PERSONAL DETAILS

Student Family Name (surname): _____
 Given Name: _____ Preferred Name: _____
 Date of Birth: _____ Gender: Male Female Other
 Current Address in Australia or Overseas:
 Street number and name: _____
 Suburb/City: _____ State: _____
 Country: _____ Postcode: _____
 Current Mobile Number: _____
 Student's Email Address: _____
 Passport number: _____ Nationality: _____ Main Language Spoken: _____
 Emergency Contact Name: _____ Relationship to the student: _____
 Emergency Contact Number: _____
 Is the student considered to have a disability, impairment of long-term condition? Yes No
 If you answered yes, do they require extra learning support? Yes No Please, Specify: _____
 Extra Details: _____

VISA REQUIREMENTS

Which visa type do they plan to study at IH? Student* Tourist Other _____
 Where will you apply for your visa? Within Australia Outside Australia **Please attach a valid passport copy.*

OVERSEAS STUDENT HEALTH COVER (OSHC) Student Visa holders only

All student visa holders must have OSHC for the duration of their stay in Australia. Do you want IH to arrange OSHC?
 Yes, duration: _____ months (Minimum 3 months) No
 Cover Type: Single Dual* Family*. **Please attach copy of passport for all family members.*

COURSES

<input type="checkbox"/> Primary School Preparation (PSP) <small>For student aged 8 to 12 years old</small> Campus: <input type="checkbox"/> George Street – IH Sydney <input type="checkbox"/> Queen Street – IH Melbourne <input type="checkbox"/> High School Preparation (HSP) <small>For student aged 12 to 17 years old</small> Campus: <input type="checkbox"/> George Street – IH Sydney <input type="checkbox"/> MILC Brighton – Melbourne Start Date: ____/____/____ Every Monday No. of weeks: _____	<input type="checkbox"/> Junior Holiday Program (JHP) <small>For student aged 12 to 17 years old</small> For dates, please contact your Marketing Manager Start Date: ____/____/____ No. of weeks: _____ Campus: <input type="checkbox"/> Sydney <input type="checkbox"/> Melbourne <input type="checkbox"/> Gold Coast	AEAS Course <input type="checkbox"/> AEAS Test Preparation Course Year 7 – 9 <input type="checkbox"/> AEAS Test Preparation Course Year 10 – 12 Start Date: ____/____/____ No. of weeks: _____ Campus: <input type="checkbox"/> Sydney
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FURTHER EDUCATION

Current school year: _____
 Have you decided your pathway school? Yes No
 If Yes, Provide your preferred pathway school: _____
 If Yes, Provide your preferred pathway school: _____
 School Name: _____
 School year applying for: _____
 Do you have proof of further studies?* Yes No.

AGENCY REFERRAL

Education Agency: _____
 Counsellor Name: _____
 Agent Email: _____

**If yes, please provide COE / Letter of Offer*

STUDENT PARENT DETAILS

Full name		Relationship to the student		
Residential Address		Suburb/city		State & Post code
Email Address		Phone number		Country

I declare that I am the legal parent of (Student's full Name) _____ and (select any option below)

CAREGIVING OPTIONS (SELECT 1 OF THE OPTIONS BELOW)

OPTION 1

- I reside in Australia and will act as the primary contact and caregiver for the student during their course duration and agree that:
- At least one parent will, at all times, reside with my child for the entire period of his/her enrolment in International House. Failure to comply will lead to the termination of my child's enrolment.
 - I will advise the school of any changes to my address or contact details during the period of my child's enrolment.
 - If I need to leave temporarily or make temporary welfare arrangements for my child, I will contact International House and will not depart until I have written approval from International House.

Please provide the Australian contact details (Address in the table above).

OPTION 2

- I give authority to the person below to accompany my child to and from the school (Must be over 25 years old and permanent Australian resident).

Caregiver Full name		Relationship to the student		
Australian Address		Suburb/city		State & Post code
Email Address		Phone number		Country AUSTRALIA

And act as their caregiver between the dates of ___/___/20__ (student arrival date) and ___/___/20__ (student departure date). This person **MUST sign the Contract Form** in following sections.

In consideration of International House Training Services (IH) accepting my child as a caregiving student, I agree to and do hereby indemnify IH, its officers and employees, from and against all action suits, damages claims and demands arising out of any illness or accident or death which may occur to the above-named student during or as a result of any activity or function during the period of the student studying with at IH.

I further authorise any IH officer or employee in the event of illness or accident to obtain such medical assistance or treatment for the above-named student, including any anaesthetic or blood transfusion as he or she may consider necessary and for this purpose to engage any doctors, nursing assistance or hospital accommodation and in this event, I agree to pay on demand all such medical and hospital fees. I further agree to pay all such reasonable expenses incurred by IH in communicating with me or members of the student's family.

I also confirm that my child has my consent to: (12 to 17 years old ONLY)

- Travel from the residence of their host/caregiver to the IH School Campus, on public transport and without an adult present, to attend their daily classes (if under 12 must be accompanied by an adult)
- Travel from the IH School Campus to the residence of their host/caregiver, on public transport and without an adult present, after their daily classes & activities.
- Leave the IH School Campus during the allocated break to purchase lunch in a nearby food outlet, without an adult present.
- Participate in all activities and excursions organised and supervised by the school including sporting activities (soccer, rugby...).

Extra information required: Caregiving Contract Form (Page 4)

OPTION 3

- I give authority to IH Training Services to place my child under care of a Host Family. Please complete homestay information in the following section. For Melbourne HSP and PSP students, please fill up MILC Information on page number 3.

Extra information required: Homestay Information (Page 3)

Photo and Video Consent: by signing this form, you consent to IH Sydney Training Services using and publishing images and videos of the student in any of its publications and materials (including written, electronic, or multimedia materials), on our websites and social media channels, for educational, promotional, or reporting purposes.

Parent's name: _____ Parent's signature: _____ Date: ___ / ___ / 20__

HOMESTAY

I require Homestay for my child.
 Arrival Date: ___/___/___ Departure Date: ___/___/___

*Student must book homestay for full duration of course.
 *At least 6 weeks' notice is required for accommodation requests.

Airport Pick-up is mandatory with Homestay*
 Airport for Arrival and Departure: ___/___/___ ___/___/___
 Flight number: _____ Date: ___/___/___ Time: _____

*Written consent must be provided if your child will be picked up by a family member.
 *Flight details must be provided at least 4 weeks before arrival. Please notify us if there is a visa delay.

I require Airport drop off for my child*
 Flight number: _____ Date: ___/___/___ Time: _____

Extra: Unaccompanied minor service with check-in assistance and predeparture stand-by (Additional fees apply).
*Airport drop off is mandatory for Junior Holiday programs students. Written consent must be provided if the student is traveling with a family member.
 *Compulsory late check out fee applies for flights departing after 1pm.

Does your child need CAAW? YES NO

Does your child have any allergies or medical conditions we should be aware of? YES NO
 Details: _____

Is your child ok with pets? YES NO
 Details: _____

Do you have any special accommodation requests? YES NO
 Details: _____

Does your child have any special diet requests? YES NO
 Details: _____

Is your child ok living with other children? YES NO
 Details: _____

MILC ACCOMMODATION ARRANGEMENT – (ONLY MELBOURNE PSP & HSP)

I require MILC BOARDING accommodation for my child.
 Check in: ___/___/___ Check out: ___/___/___

Airport Pick-up for my child
 Airport for Arrival: ___/___/___
 Flight number: _____ Date: ___/___/___ Time: _____

I require Airport drop off for my child*
 Flight number: _____ Date: ___/___/___ Time: _____

Extra: Unaccompanied minor service with check-in assistance and predeparture stand-by (Additional fees apply).
*Compulsory late check out fee applies outside business hours (09:00am to 05:00pm).

Does your child need CAAW? YES NO

Do you have any special requests? YES NO
 Details: _____

Do you require MILC after-hours activity (Extra Fee applies)? YES NO
 Details: _____

Does your child have any special diet requests? YES NO
 Details: _____

CAREGIVING CONTRACT FORM

The role of the caregiver is to appropriately supervise the student, both inside and outside IH, during their period of stay in Australia. The caregiver will inform the parent of any problems during the student's stay in Australia and for the period of their education. The respective roles of the caregiver and parent are outlined below.

Obligations of the caregiver

- 1.1 **School Attendance:**
 - Ensure the student attends classes regularly and punctually.
 - The student's visa requires 80% minimum attendance.
 - Notify the school at the beginning of the day if the student is to be absent.
 - All students under the age of 18 must follow the curfew time of 6pm on a school day, 10pm on weekends, or 10pm on nights where prior permission has been obtained.
 - Ensure the student is appropriately supervised at all times outside of school hours, including social activities.
- 1.2 **Behaviour:**
 - Ensure the student behaves acceptably, as required of young people under 18 years in Australia.
 - Ensure the student is aware of 000 and 24-hour emergency numbers, and Australian laws relating to under 18 years old.
- 1.3 **Communication in English, with IH:**
 - Attend parent/teacher interviews, if required.
 - Provide regular feedback to IH and the parents regarding any behaviour or conduct affecting the student's progress.
 - Email or call to ask for leave of absence for the student for interviews, family visits, medical appointments etc.
 - Attend any briefings or meetings, as required by IH.
 - Sign all documents (including excursion approvals) on behalf of the parent of the student.
- 1.4 **Communication with the parents of the student:**
 - Advise the parents in writing of the student's living, travel, and excursion arrangements as and when they occur.
 - Inform the parents promptly of any issues.
- 1.5 **Medical Attention:**

Assist the student in seeking any necessary medical attention and ensure proper medical certification is obtained in case of absence from class. In circumstances where the caregiver is unable to provide emergency transport, the student's parents will be responsible for the cost of this transport, i.e. the taxi fare to the doctor's surgery or to return to the homestay residence for rest.

 - 1.6 **Medical Emergencies:**
Contact the parents and IH where the student is involved in an accident, has a serious illness, or requires urgent medical attention.
 - 1.7 **Personal Assistance:**
Help the student with any personal, cultural or resettlement problems and any other problems associated with the student's stay and study.
 - 1.8 **Contact Details:**
Ensure their contact details, and any subsequent changes in those details, are provided to the student, parents, and IH.
 - 1.9 **Availability:**
Be available for the student and IH in case of emergencies, at all times.

Obligations of the parent

- 1 **Contact details:**
Provide to IH all relevant contact information so that the caregiver can communicate with them at any time.
- 2 **Authority:**
Authorise the caregiver and IH to communicate and obtain information from the student, and to sign all documents including excursion approvals, on their behalf.
- 3 **Any other relevant information:**
Provide any relevant information which will aid in caring and supporting the student during their period of study in Australia, i.e. travel arrival details, any allergies, or medical conditions.
- 4 **Response time:**
Respond to caregiver requests in timely manner.
- 5 **Emergency transport:**
Where the student requires emergency transport, for example by way of taxi due to illness, the parent agrees to pay all the transport costs incurred.

Caregiver's name (a person nominated by the parent): _____ Caregiver's signature: _____ Date: ____/____/20____

CAREGIVER MUST PROVIDE PHOTO ID