

Host Family Inspection Report

Host Family Name: _____				Date: ____/____/____	
Address: _____				Inspector: _____	
Type of building:	House	Unit	Other	Pool <input type="checkbox"/> Yes <input type="checkbox"/> No	Tennis Court <input type="checkbox"/> Yes <input type="checkbox"/> No
Number of Bedrooms:	2	3	4	5	Other
Number of Family Members:	1	2	3	4	5 6 or more
Distance from school to home by Public Transport:					
	mins. (train station)	mins. (bus stop)			
Travelling time between home and nearest train station or bus stop:					
	hr(s). mins. (on foot)	hr(s). mins. (on foot)			
Single or Shared:	How many other students in the house?		1	2	3 4 or more
	Nationalities of other students:				
Student's bedroom:	Size: too small small (acceptable) satisfactory				
Noise:	acceptable	unacceptable			
Furniture:	enough	insufficient			
Hygiene:	acceptable	unacceptable		Overall:	Specify:
Family Member:	normal	abnormal:		Specify:	
Does the accommodation and living arrangement comply with the local council requirements?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Inspector's comments:					
Suitability: <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is 'No', can the problems be rectified? <input type="checkbox"/> Yes <input type="checkbox"/> No If answer is 'Yes', what measure has been taken? Has the problems been rectified? <input type="checkbox"/> Yes <input type="checkbox"/> No Terminated: <input type="checkbox"/> Yes. In what circumstance? _____ _____ <div style="text-align: center;"><input type="checkbox"/> No</div>				Approved by: _____ Accommodation/Guardian Officer Other comments if any: Date: ____ / ____ / ____	