

## Host Family Inspection Report

Host Family Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Inspector: \_\_\_\_\_

<b>Type of building:</b>	House	Unit	Other		Pool		Tennis Court
				Yes		No	Yes No
<b>Number of Bedrooms:</b>	2	3	4	5	Other		
<b>Number of Family Members:</b>	1	2	3	4	5	6 or more	
<b>Distance from school to home by Public Transport:</b>	mins. (train station)	mins. (bus stop)					
<b>Travelling time between home and nearest train station or bus stop:</b>	hr(s). mins. (on foot)	hr(s). mins. (on foot)					
<b>Single or Shared:</b>	<b>How many other students in the house?</b>		1	2	3	4	Or more
	<b>Nationalities of other students:</b>						
<b>Student's bedroom:</b>	<b>Size:</b> too small		small (acceptable)	satisfactory			
<b>Noise:</b>	acceptable	unacceptable					
<b>Furniture:</b>	enough	insufficient					
<b>Hygiene:</b>	acceptable	unacceptable			Overall:		Specify:
<b>Family Member:</b>	normal	abnormal:			Specify:		

Does the accommodation and living arrangement comply with the local council requirements?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Inspector's comments:</b>			
Suitability: <input type="checkbox"/> Yes <input type="checkbox"/> No		Approved by: _____	
If answer is 'No', can the problems be rectified? <input type="checkbox"/> Yes <input type="checkbox"/> No		Accommodation/Guardian Officer	
If answer is 'Yes', what measure has been taken?		Other comments if any:	
Has the problems been rectified? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date: ____ / ____ / ____	
Terminated: <input type="checkbox"/> Yes. In what circumstance?			
_____			
_____			
<input type="checkbox"/> No			