Under 18 International Student Application for Accommodation



Under the Education (Pastoral Care of Tertiary and International Students) Code of Practice 2021 WITT Te Pūkenga requires international students under 18 years of age, and not living with their parents/legal guardians while in New Zealand, to live in WITT approved accommodation.

Accommodation application process

- 1. All international students under 18 years are required to complete this form.
- 2. This form is required back at least 4 weeks before your arrival in New Zealand.
- 3. Please answer ALL questions on this form, sign, date and email back to: international.accommodation@witt.ac.nz.
- 4. You will receive an email to confirm we have received your application.
- 5. You will be notified once the accommodation is approved.
- 6. Once approved you are required to pay the homestay accommodation fees in full prior to your arrival.

1 Personal details

Surname/Family name					
First name		Preferred name			
	 F				
Date of birth	Nationality				
Mobile number		Gender	Male	Female	Other
Email address					
Programme of study					
Expected length of stay					

2 Accommodation selection

Accommodation options - Please tick one of the following two options

Homestay Accommodation — This is accommodation arranged by WITT Te Pūkenga whereby the student will be living with a New Zealand family. The cost is \$345.00 a week. Please complete all pages on this form. This information will enable WITT Te Pūkenga staff to place your child with a suitable host family. Please note you will be required to live in homestay until you are 18 years of age.

Designated Caregiver — This is accommodation arranged by you parents or legal guardian of the student. A designated caregiver must be a family member or a close friend of your family. While living with a designated caregiver WITT Te Pūkenga are not responsible for the students day to day care.

Any costs or charges associated with this accommodation option are between the designated caregiver and the parent/ guardian. You are required to complete the Designated Caregiver Indemnity document in this form. Please note that you will be placed in Homestay Accommodation should WITT Te Pūkenga deem the designated caregiver unsuitable. You must therefore complete all pages on this form.

Homestay requirements						
Would you like to live in a home with children?		YES		NO	lf yes, please give details:	
Are you happy to live with a family that has a domestic pet? Many New Zealand families have a pet cat, dog or bird		YES		NO	lf yes, please give details:	
Health and medical information						
Do you have any pre-existing medical conditions, disabilities or allergies?		YES		NO	lf yes, please give details:	
Are you taking any medications?		YES		NO	lf yes, please give details:	
Do you have any special dietary requirements (vegetarian, vegan, gluten free, etc)?		YES		NO	lf yes, please give details:	
If you are vegetarian or vegan, do yo	ou mind	living wi	th a fam	ily that e	eats meat?	YES NO
Do you have any food allergies?		YES		NO	If yes, please give details:	
Personal information						
Do you smoke or vape? Some homestay hosts will not accept smoking or vaping, so we need to take your smoking/vaping into consideration YES NO						
Do you have any special requirements for cultural or religious events?		YES		NO	lf yes, please give details:	
What are your interests, sports or hobbies?						

4 Homestay fees

- Homestay fees are \$345.00 a week
- Once the accommodation application form has been completed, it must be submitted to WITT Te Pūkenga and payment of fees made in full to confirm booking request.
- Payment for accommodation MUST be made at least 4 weeks prior to the commencement of the course.
- · Accommodation will not be CONFIRMED until payment has been received by WITT Te Pūkenga.

Making payment of homestay fees

Payments may be made by telegraphic transfer, credit card (Visa, Bankcard or MasterCard) to:

Account number:	03-0713-0062295.00	Bank Address:	New Plymouth Branch, New Zealand
Payee:	Te Pūkenga – NZIST - WITT	Particulars:	Your Surname
Bank:	Westpac New Zealand Ltd	Code:	ACCOMMODATION
SWIFT CODE:	WPACNZ2W	Reference:	Your Date of Birth

Note: This section is to be completed by the student's parent(s) or legal guardian(s) only. It cannot be completed by an international agent. Students going into homestay accommodation do not need to complete this section.

I/we, as the parents/legal guardian* of ______ (students name), have chosen for our child to stay with a Designated Caregiver in New Plymouth that was not arranged by WITT Te Pūkenga.

I/we understand that a Designated Caregiver must be a family member or a close family friend.

I/We, as the parents/legal guardian take full responsibility for the placement and the ongoing welfare of our child for the duration of their stay with the Designated Caregiver.

I/We understand that WITT Te Pūkenga will:

- Establish communication and meet with the designated caregiver.
- Visit the home of the designated caregiver prior to enrolment to ensure that the home meets code requirements including assessing whether the designated caregiver can provide a safe physical and emotional environment for the student and determine that the accommodation is not a boarding establishment. (Does not have five or more international students staying in the house.
- Require a confirmation of identity, reference check and police vetting of all persons aged 18 and over residing in the household.
- Meet with the student and carry out home visits at least quarterly to monitor and review the residential care, ensure the student is appropriately supervised and address any concerns.

• If the WITT Te Pūkenga staff deem the accommodation to be unsuitable, the institute retains the right to place the child in homestay accommodation. **Note:** You are required to provide us with the following information about the designated caregiver in New Plymouth. This caregiver will be visited by WITT Te Pūkenga staff to assure that they meet Education (Pastoral Care of Tertiary and International Students) Code of Practice 2021.

Designated careg	giver's name		
Relationship to s	tudent		
Designated caregiver's address			
Phone number		Email	
Signature of pare	ent/guardian		

Please attach one of the following options as proof of your guardianship status when submitting this form. This proof can be any of the following: • The child's birth certificate with the parent's name(s) on it

- The child's birth certificate with the parents hame(s)
- Front, back and bio pages of your passport(s)
- $\cdot\;$ A legal document stating that you have legal guardianship over this child.

6 Emergency contact (compulsory for all students)

We must have the details of your parent(s) or legal guardian in case of emergency.

Full name						
Do they speak	English?	YES	NO	Relationship to you		
lf no, what lan	If no, what languages(s) do they speak:					
Address						
Phone numbe	r			Email		

7 Arrival information and pick up

Country of departure	Flight number
New Zealand date of arrival	Time of arrival
New Plymouth date of arrival	Time of arrival
Note: WITT Te Pūkenga is required to pick you up upon your arrival in New Ply	mouth. Please specify where you would like to be picked up from.
Select one: NEW PLYMOUTH AIRPORT NEW PLYMOUT	TH BUS STATION
8 Declaration	
For all applicants: Please read this section carefully and tick each box to show	that you understand and accept the condition:
I have answered all questions honestly and truthfully.	I understand that the homestay accommodation fees are non-negotiable and remain in force for the duration of my stay.
I will inform WITT Te Pūkenga of any changes in my child's living arrangement.	Two weeks's notice must be given when choosing to leave accommodation, with the agreement of WITT Te Pūkenga. Failure to give 2 weeks' notice to the host family may result in additional fees being charged to your account.
I certify that all the information I have provided is true and correct.	I agree to contact WITT Te Pūkenga with any issues I might have so that I can access support and guidance.
I understand that I may be living in a family environment. Most homes or cause unnecessary stress, harm or anguish, I may be moved by WI accommodation fee will apply.	
Full name	Date
Signature	

* By writing your name here, this form is considered signed by you.