

A. STUDENT DETAILS

LEGAL Surname	Given Name/s	Preferred Name
Gender	Date of Birth	Age at 01/12/2019

Permanent Mailing Address	Suburb	State	Postcode
Home phone	Mobile Phone	Student's Email Address	

Country of Birth	Country of Citizenship	Country of Legal Residence
Passport Number	Passport Expiry Date	Passport Place of Issue

B. FAMILY INFORMATION

Family Structure - please list the parents / guardians with whom the student lives:

Parent / Guardian Details:

Mother Father Step-mother Step-father Other:

Title	First Name	Surname

Address	Age
Mobile phone	Email Address
Occupation	Work phone

Parent / Guardian Details:

Mother Father Step-mother Step-father Other:

Title	First Name	Surname

Address	Age
Mobile phone	Email Address
Occupation	Work phone

Details of brothers, sisters and other family members who are regularly at the student's home.

Name	Date of Birth	Age at 01/12/2019	Occupation or role in Family

Contact Details of any natural parent with whom the student does NOT live.

Legal Name	Relationship	Contact Number

C. EMERGENCY CONTACT PERSON

First Name	Surname	Relationship to Student
Home phone	Mobile phone	Email Address

D. EXCHANGE EXPERIENCES

Has anyone in your family:

- Hosted a WAATI Intercultura Exchange Student? If yes, please give details of who and when.

- Participated in a WAATI – Intercultura Exchange to Italy? If yes, please give details of who and when.

- Participated in any other exchange programs? Please indicate where and for how long.

- Travelled abroad or lived in another country? Please indicate where and for how long.

Applicant Signature: _____

Date: _____

Parent / Guardian Signature : _____

Date: _____

1. **Host Family Grouping Preferences.**

Students are placed in a wide variety of host families, based on a many factors. Preferences will be considered, but no guarantees can be made.

Preference	Family Grouping
1	
2	
3	
4	
5	
6	

2. **RELIGION**

What is your religion?

While on exchange, would you wish to practise your religion?

Yes, essential to practice

Yes, desirable to practice

No, not essential to practice

3. **SMOKING**

Are you a smoker and if so, could you abstain during the exchange?

Non-smoker

Smoker, but I could abstain

Smoker, and I could not abstain

4. **DIET**

Do you have any dietary restrictions?

Yes

No

If yes, please give details:

If you are vegetarian, please indicate which category:

Semi-vegetarian – eats fish & poultry, but no red meat

Lacto-ovo vegetarian – eats dairy & eggs, but no meat

Ovo vegetarian – eats eggs, but no dairy and no meat

Vegan – eats only food from plant sources

5. **ALLERGIES**

a) Please specify all allergies you have and the severity of any possible allergic reactions. If your allergy is severe or critical, please also complete Form 4, p3.

b) Please check the appropriate boxes if you CANNOT live with:

- | | | | |
|-------|---------|----------|------------------------|
| Cats | Indoors | Outdoors | Why? |
| Dogs | Indoors | Outdoors | Why? |
| Other | Indoors | Outdoors | Which animals and why? |

6. PLACEMENT RESTRICTIONS

If you have any physical restrictions, impairments or conditions that may impact on placement options or participation in everyday family and / or school activities, please indicate them in full.

7. INTERESTS AND ACTIVITIES

List your major interests and activities and how often you like to pursue them.

8. LANGUAGES

Please indicate your ability level in Italian and any languages other than English

Italian beginner Italian intermediate Italian advanced

Other:

9. COMPLETION OF EDUCATION

Indicate the month and year you anticipate completing your secondary education.

Month: Year:

10 SIGNATURES

Whilst we understand that every effort will be made, we also realise that the host country may not be able to accommodate all the restrictions or requirements indicated in the completed application and that the acceptance to the WAATI program is not a guarantee that these preferences can be honoured.

Applicant Signature: _____ Date: _____

Parent/s or Guardian/s Signature: _____ Date: _____

_____ Date: _____