



IIE Homestay Program

Host Family Application Form / Information Sheet

Date: _____

Applicant's Name: _____ Birth Date: _____

Home Phone # _____ Cell Phone# _____

E-mail address: _____ Wi-Fi : Yes ____ No ____

Occupation: _____ Work Phone # _____

Home Address: _____

Travel time to Waikiki _____ minutes by _____ (bus, foot, or bike)

Have you hosted before? Yes ____ No ____ If yes—when & where? _____

From what date are you available to host students? _____

How did you hear about us? _____

HOUSEHOLD MEMBERS including yourself

Name	DOB	Relationship	Occupation
1.			
2.			
3.			
4.			

AVAILABLE ROOM(S): Description of available room(s) for ex. (Upstairs room w/ twin bed)

1.
2.
3.

FAMILY PETS: (check the box and indicate the number)

- | | |
|---|---|
| ☐ No pets | ☐ Bird(s) _____ |
| ☐ Indoor cat(s) _____ | ☐ Indoor dog(s) _____ |
| ☐ Outdoor cat(s) _____ | ☐ Outdoor dog(s) _____ |
| | ☐ Reptile(s) _____ |
| | ☐ Other _____ |

Is smoking allowed? ☐ No ☐ Yes, inside ☐ Yes, outside ☐ smoker in family

Institute of Intensive English

2155 Kalakaua Ave. Suite 700, Honolulu, HI 96815, USA
email: info@iiehawaii.com website: www.studyenglishhawaii.com
Phone 808-924-2117 Fax 808-924-3227



HOSTING PREFERENCES:

I am interested in offering Homestay:

- ☐ With meals
- ☐ Without meals
- ☐ Both

I am interested in hosting:

- ☐ Males only
- ☐ Females only
- ☐ Males and Females

I would prefer to host a student from:

- ☐ Any country
- ☐ Nationalities I would prefer to host: _____
- ☐ Nationalities I would prefer **not** to host: _____

I can host:

- ☐ Adult students: 18 years old and older
- ☐ Senior students: 50+
- ☐ Young adults: 14-17 years old
- ☐ Children: 12-13 years old
- ☐ Vegetarians
- ☐ Students with other diet restrictions
- ☐ Students with special needs or requirements

How much time per week do you expect you can spend with your host student?

- ☐ Not much time during the weekdays but some on the weekends
- ☐ Evenings and some time on the weekend
- ☐ My family is very busy, we will not be able to spend much time with the student
- ☐ Other _____

What activities will you be able to do with the student?

What hobbies or activities is your family involved in?

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MEALS: Please describe the following typical meals for your family?

(Question does not apply to Homestay – No Meals)

Breakfast: _____

Dinner: _____

Why are you interested in hosting a student?

What is a welcome message that we can send to the student before he/she arrives?

Signature: _____ Date: _____

Please post or email this application form to the address located at the bottom of this form or call IIE at 924-2117 to set up an appointment for a viewing of your home.

Thank you for taking the time to fill this out and we look forward to your joining our IIE Hawaii Homestay program.

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