

69 Middlepark Road, P O Box 11 314,  
Christchurch, New Zealand  
Telephone 64 3 348 7010  
Facsimile 64 3 348 2621  
Email: international@stc.school.nz

# ST THOMAS OF CANTERBURY COLLEGE



## DESIGNATED CAREGIVER AGREEMENT

The College acts as the Primary Care Provider (guardian) for our International Students unless the student is living with his parent or with a close relative or close friend (Designated Caregiver). If you are appointing a close relative or family friend as a designated caregiver you are required to complete this form.

I/We designate ..... (*Insert Name of Designated Caregiver*) to provide accommodation for my/our son, to attend St Thomas of Canterbury College as an international student from ..... to ..... subject to the approval of the Education Provider prior to enrolment.

Student's name (as it appears on the passport) .....

Student's preferred name: .....

Print Designated caregiver's name: .....

Relationship to Student .....

(Uncle/Aunt/Grandparent/close family friend)

Address: .....

Phone..... Mobile .....

I/we understand that the education provider will:

- **Visit the home of the designated caregiver prior to enrolment to determine that the living conditions are of an acceptable standard**
- **Assess whether the designated caregiver will provide a safe physical and emotional environment for the student**
- **Determine that the accommodation is not a boarding establishment (i.e. does not have five or more international students staying in the home)**
- **If the accommodation designated by the parents is a boarding establishment, the school will follow the provisions relating to boarding establishments as set out in the Code of Practice**
- **Meet with the designated caregiver/s and establish communication with the caregiver**
- **Meet the student at least quarterly to ensure the accommodation is suitable**
- **May require a Police vet to be undertaken, if the education provider considers it appropriate.**

Should this arrangement change I/we undertake to inform St Thomas of Canterbury College immediately. Further, I/we understand that should St Thomas of Canterbury College have any concerns regarding the welfare of my/our child, they may refer him to the relevant welfare authorities, or any other appropriate agency in New Zealand.

I/we understand that St Thomas of Canterbury College will make every endeavour to ensure the safety and welfare of my/our child while studying in their school.

### DECLARATION:

I/we confirm that the person/s nominated as the designated caregiver/s is/are a 'bona fide' relative or close family friend.  
(*Proof of this relationship may be required*)

Signed ..... Date.....  
(*Must be signed by student's Father or Mother*)

Print Name: Mr/Mrs .....

Contact Telephone number in Home Country: .....

Contact address in Home Country: .....

Email Address: .....

St Thomas of Canterbury College has agreed to observe and be bound by the Code of Practice for the Pastoral Care of International Students published by the Minister of Education. Copies of the Code are available on request from this institution or from the New Zealand Ministry of Education website a <http://www.minedu.govt.nz/goto/international>

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## STUDENT ACCOMMODATION REQUEST

Name .....  
 Age ..... Birth date: ..... Form/Class .....  
 Home Country ..... Address .....  
 Phone: HOME ..... Work ..... Fax .....  
 NEW ZEALAND CONTACT: Name ..... Phone .....

What career are you planning?	
Religion?	
Do you plan to return home in the term holidays?	
Hobbies and Interests	
What musical instrument do you play?	
What work do your parents do?	Mother:
	Father:
Do you mind living in a house with pet animals?	
Do you have any special food preferences or special diet?	
Have you travelled to other countries before? If so, which ones?	
Have you lived away from home before?	
Are there any special items you plan to bring with you?	

Do you smoke? ... Yes/No    Do you mind living in a house with smokers?    Yes/No  
 Do you have any special health or medical needs, e.g. Malaria, Asthma, Allergies? .....

Do you have any brothers or sisters? Yes/No  
 If so, their Names: 1 ..... Age ..... Male/Female  
                           2 ..... Age ..... Male/Female  
                           3 ..... Age ..... Male/Female  
                           4 ..... Age ..... Male/Female

Is there anything special you would like in a homestay? .....

Tell us a little bit about yourself .....

Is there any other request you would like to make? .....

When do you plan to arrive in New Zealand? Date ..... Flight Number ..... Arrival time .....

Signed ..... Print Name of Student .....  
 (Student's Signature)

Signed ..... Print Name of Parent .....  
 (Parent's Signature)

Date .....