



Cambridge High School Application Form

Please attach a passport photo

Full name of Student _____ Male Female

Preferred Name _____ Date of Birth _____

Present Year of Study _____ Present School _____

Nationality _____ Enrolling for Year _____

Passport Number _____

Father/Guardian (Name in full) _____

Address _____

Occupation _____

Business Phone _____ Home Phone _____

Fax Number _____ Email _____

Mother/Guardian (Name in Full) _____

Address (If different from Father) _____

Occupation _____

Business Phone _____ Home Phone _____

Fax Number _____ Email _____

The parents or guardians of the international student are required to complete and sign this document.
I/We accept that our child shall be subject to the rules and regulations of Cambridge High School.

Name/s _____

Signature/s _____

I/We are the Father and Mother Mother Father Other Person

If Other person, please state your relationship to the student _____

Period of Study ____ / ____ / ____ to ____ / ____ / ____

Subject Choices (in order of preference)

1. _____ 2. _____ 3. _____

4. _____ 5. _____ 6. _____

Hobbies / Sports / Special Interests _____

Career Plans _____

STUDENT HOMESTAY REQUIREMENTS - MUST BE COMPLETED BY PARENT IN CONSULTATION WITH STUDENT

How many brothers do you have? _____ How many sisters do you have? _____

Age(s) of Brothers(s) _____ Age(s) of Sister(s) _____

Do you play any musical instruments? _____ If so what? _____

Would you like other children in your homestay? Yes No

Would you like children younger than 12 in your homestay? Yes No

Would you like children that are 13 years or older in your homestay? Yes No

Would you like a family with more than four people?
(Mother, father, 2 or more children) Yes No

Would you like a family where another international student of a
different nationality to yourself lives? Yes No

None of the above, I require a homestay without children Yes No

Do you want to stay in Cambridge town? Yes No

Do you want to stay in the countryside? Yes No

Do you have an allergy to pets and/or animals? Yes No

Would you like a homestay with pets? Yes No

Will you bring a laptop computer with you to use at your homestay? Yes No

What foods do you like to eat? _____

Are there any foods your do not eat? _____

Do you have any special requirements of your homestay family? _____

Cambridge High School will endeavour to match the student homestay requirements with a homestay family subject to availability; however in some cases not all requirements will be able to be met.

HEALTH DETAILS - Medical Information

Hepatitis A or B Yes No Epilepsy Yes No Rheumatic Fever Yes No

Glandular Fever Yes No Asthma Yes No Heart Condition Yes No

Bee/Wasp Allergy Yes No Diabetes Yes No

Allergic reaction to: _____

Medication required: _____

Other medical condition or disability including mental health issues, physical disability, violence or abusive behaviour or any additional needs that the school should be aware of?

Does the student have a physical condition that might affect classroom learning eg: hearing loss, need for glasses, motor skills loss etc. Yes No

If yes, please explain: _____

Date of last Tetanus injections: _____

Date of last Measles injections: _____ (Please send in a copy of your vaccination certificate)