



MORRIS CATHOLIC HIGH SCHOOL

Office of Institutional Advancement

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www.morriscatholic.org

HOMESTAY PARENT AGREEMENT

In consideration of the Board's accepting the application of the Home stay Parent(s) to host a foreign student the Home stay Parent(s) agrees to:

1. All adults 18 years and older must be fingerprinted and complete the Protecting God's Children class.
2. The Home stay Parent(s) agree that the fee paid by the student is \$1000.00 per full month.
3. The Home stay Parent(s) confirms that all household members desire to host the foreign student.
4. The Home stay Parent(s) agrees to provide students with their own room with a suitable desk for study purposes and necessary items such as linens, towels, etc.
5. The Home stay Parent(s) will provide a clean, orderly, pleasant and safe living environment for the student.
6. The Home stay Parent(s) will provide to the student three meals a day, seven days a week consisting of a variety of nutritional well-balanced foods plus a snack each day. These meals should be taken with the family whenever possible.
7. The Home stay Parent(s) will involve the student in family activities and outings.
8. The Home stay Parent(s) will **NOT** require the student to maintain their house or yard, babysit children or cook their meals. With the exception of keeping their room and all other areas used, such as the kitchen and bathroom, clean and orderly.
9. The Home stay Parent(s) will **NOT** leave students unsupervised overnight.
10. The Home stay Parent(s) will **NOT** allow students **under 18 years of age** to take unsupervised out of town trips.
11. The Home stay Parent(s) shall discuss with the Home stay Supervisor any unresolved misunderstandings or conflicts between the Home stay Parent(s) and student.
12. The Home stay Parent(s) will promptly notify the Home stay Supervisor of any changes with regard to household members (boarders, renters, family members moving in or out, etc.)
13. The Home stay Parent(s) will notify the Home stay Supervisor if the student attempts to move from their home.
14. Household members **shall not** abuse alcohol or drugs.
15. Household members **shall not** make improper advances toward the student.
16. The Home stay Parent(s) must instruct the student on the course of action to take

in the event of fire and other emergencies.

17. Household members understand that if they **do not** meet program standards at any time the student may, at the discretion of the Home stay Supervisor, be moved from their home, **without** notice or lieu payment.

Home stay Parent(s) Signature(s) Date

FAMILY INFORMATION

Please list all members of your household.

Given Name Family Name Age Relationship to Family

MAILING ADDRESS

Street Address:

City:

Postal Code:

Telephone:

Fax:

E-mail:

DAYTIME CONTACT INFORMATION

Name:

Workplace:

Telephone:

Name:

Workplace:

Telephone:

Please indicate your family hobbies and interests (check as many as apply):

Sports Shopping Music Reading Movies Fishing Arts & Crafts Cycling

Cooking Other:

What family activities would the student be able to participate in?

What chores would the student be asked to perform in the home?

Does anyone smoke in your home? Yes No

Please list food-related information, such as allergies, vegetarian, religious observances, and meal times: