

Australian Ideal College

Registered as Australian Ideal College Pty Ltd RTO No.: 91679 | CRICOS Provider Code: 03053G Sydney Campus: Levels 7 & 8, 75 King Street, Sydney NSW 2000 Australia Adelaide Campus: Level 3, 21-23 Rundle Mall, Adelaide SA 5000 Australia Hobart Campus: GRD, 116 Murray Street, Hobart TAS 7000 Australia T: +61 2 92622968(Sydney)|+61 8 8123 5780(Adelaide)|+61 3 6231 2141(Hobart) E: info@aic.edu.au | W: www.aic.edu.au

Request Form for Accommodation Placement/Homestay

Please fill out this form if you would like Australian Ideal College to arrange an airport pickup service for you, or if you have changed your flight details. You can return the completed form to us via email or fax. Note that a nominal charge is applicable for an airport pick-up service.

Please tick ($\sqrt{\ }$) in the relevant box: Request for Accommodation						Placement Homestay			
Student Details:									
Full name		Gender	Gender		Male	Female	Other		
Date of birth		Age	Age						
County of birth			Passport	Passport No.					
Email				Phone No.					
Course(s) enrolled	ed			Ref. No./Student ID					
Interest/Hobbies		Your 1st	Your 1 st language						
Emergency Contact	Person in Your Home Coun	try (or outside	e Australia))					
Full name		Gender	ender N		Male	Female	Other		
Relationship to you		Phone N	Phone No.						
1st language spoken		Mobile	Mobile						
Emergency Contact P	erson in Your Home Country	(or in Australia	a)						
Full name		Gender	Gender N		Male	Female	Other		
Relationship to you		Phone N	Phone No.						
1st language spoken		Mobile	Mobile						
Home address			·		·				
Accommodation P	reference (Note: Minimur	n stay for th	e accomm	odation or	r homesta	ıy reqi	uest is 4 we	eks)	
Duration of Stay			weeks	Room T	Room Type		Single	Shared	
Start Date				Finish Date					
Do you prefer a family with children?		No	Yes	Do you smoke?			No	Yes	
Do you prefer a family with pets?		No	Yes	Any hobbies?					
Are there any foods/fruit you cannot eat?		No	Yes -	Yes → specify:					
Do you have any allergies / health problems?		No	Yes -	Yes → specify:					
Signature of Student			Signat	ure of Par	ent/Guard	ian*			
Date of Signature			*Parents or Guardian must sign this form if the student is under 18 years of						
For AIC Office Us	e Only								
Date of Receipt			A	Illocation	Status				
Handled by			D	etailed conveyed?			No	Yes	

Remarks