

# Accommodation Request Form

Please complete all information and submit to reception for consideration.

CCEB will then let you know if your request is approved.

## Student Details

Family Name: .....

Student Number: .....

First Name: .....

Date of Birth: .....

Email: .....

Phone Number: .....

## Accommodation request

Homestay    Sharehouse Single    Sharehouse Twin

Check in date: ..... / ..... / .....   Check out End date: ..... / ..... / .....

Homestay additional information required:

Do you smoke?    Yes    No

Are dogs/ cats ok?    Yes    No

Are children under 16 ok?    Yes    No

Do you have any allergies?    Yes    No   If yes, please list: .....

Are there any foods you don't eat?    Yes    No   If yes, please list: .....

Do you have any illness/ medication?    Yes    No   If yes, please list: .....

## Fees (to be completed by CCEB Staff)

Placement Fees      \$ ..... 250.00..

HS/ SH Fees      \$ .....

Other (xmas surcharge etc)      \$ .....

Total      \$ .....

**Payment MUST be made before accommodation is booked**

## Declaration

I understand that if I make any other changes to the above request after the documents have been processed; there may be an additional placement fee charged.

Student Signature: .....

Date: .....

Guardian Signature (if student is under 18): .....

<i>Office use only</i>				Date	Initial
Approved? <input type="checkbox"/> Yes <input type="checkbox"/> No				Received	
Staff member signature:				Changed in Stars	
Date:				Agent informed (if reqd)	
Invoice Issued <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A					
Payment Received <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A					