



HOMESTAY MOVE OUT / CANCELLATION FORM

Name of Student				FILE : BABS/GDABS/NZDB/ NZIM/ BIT / DipIT /GDIT/ NDHM/ Cookery/ ECE / ESOL /SA/ Others: _____	
	(Surname)	(First Names)	(Preferred/English)	Student ID#	Programme/Course of Study
Student Mobile #				Other Contact Details (if any)	

Name of Homestay: _____ By: In-House HS Agent

New Address: _____

TO THE STUDENT:

Please evaluation your Homestay experience:

My homestay experience with this family was: (Please encircle)

EXCELLENT **GOOD** **AVERAGE** **NOT GOOD** **TERRIBLE**

Reason for Moving-Out: _____

Other Comments: _____

TO THE HOST: Please affix the date you signed and make sure you noted the date of move out above. You have to confirm these dates with the student.

I acknowledge that the student will be terminating the homestay agreement 2 weeks after i signed this form or on an agreed date.

Host Name (Print): _____ Signature: _____ Date: _____

Any Comment/s: _____

DECLARATION BY STUDENT:

Please be reminded that this is a **TWO (2)-WEEK NOTICE** from the date when your host signed this move-out form.

- I understand that it is my responsibility to give two-week notice to my homestay.
- I intend to move out from my homestay on _____.
- I need transport assistance in transferring to my next home: **YES** **NO**

Therefore, I am **LIABLE TO PAY** homestay fees until _____ *(HS Coordinator to fill-in)*, two weeks from the date my host signs this form or the date I prefer to move out that is more than 2 weeks, or as agreed by all parties concerned.

I FULLY UNDERSTAND THE ABOVE DECLARATION.

Student Name (Print): _____ Signature: _____ Date: _____

Proceed to Rm. **207** (Accounts) for homestay fees assessment

For WHITIREIA Staff Use only

Homestay Fees Available Balance	Amount due / to be refunded	Comments (if any)	Verified By Accounts: (Please initial/stamp here)	APPROVED By: (HS Coordinator)	Date Completed