## INTERNATIONAL STUDENT EXCHANGE PROGRAM

### Exchange Student Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s Surname</td>
<td></td>
</tr>
<tr>
<td>Preferred Name</td>
<td></td>
</tr>
<tr>
<td>Student’s Passport No</td>
<td></td>
</tr>
<tr>
<td>Entry Grade</td>
<td></td>
</tr>
<tr>
<td>Religion</td>
<td></td>
</tr>
<tr>
<td>Given Names</td>
<td></td>
</tr>
<tr>
<td>Date of Birth</td>
<td>Day / Month / Year</td>
</tr>
<tr>
<td>Country</td>
<td></td>
</tr>
<tr>
<td>Entry Date</td>
<td></td>
</tr>
<tr>
<td>Exit Date</td>
<td></td>
</tr>
</tbody>
</table>

*Please enclose photocopy of passport with your application*

### Exchange Parents’ Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents’ names</td>
<td></td>
</tr>
<tr>
<td>Residential Address</td>
<td>Postcode</td>
</tr>
<tr>
<td>Postal Address</td>
<td>Postcode</td>
</tr>
<tr>
<td>Email Address 1</td>
<td></td>
</tr>
<tr>
<td>Email Address 2</td>
<td></td>
</tr>
<tr>
<td>Telephone (Home)</td>
<td>Telephone (Work)</td>
</tr>
<tr>
<td>Mobile</td>
<td>Parent 1 Occupation</td>
</tr>
<tr>
<td>Religion</td>
<td>Parent 2 Occupation</td>
</tr>
</tbody>
</table>

### Emergency Contact

*In cases where a parent is not contactable*

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>Relationship</td>
</tr>
<tr>
<td>Mobile Phone</td>
<td>2nd Phone Number</td>
</tr>
<tr>
<td>Address</td>
<td></td>
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### St Hilda’s Host Parents’ Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s name</td>
<td></td>
</tr>
<tr>
<td>Parents’ names</td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td>Postcode</td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
</tr>
<tr>
<td>Telephone (Home)</td>
<td>Telephone (Work)</td>
</tr>
<tr>
<td>Mobile 1</td>
<td>Mobile 2</td>
</tr>
</tbody>
</table>

### Form Details

<table>
<thead>
<tr>
<th>Code</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent Code</td>
<td></td>
</tr>
<tr>
<td>Student Code</td>
<td></td>
</tr>
<tr>
<td>Host / Buddy</td>
<td></td>
</tr>
</tbody>
</table>
Exchange Student’s School Information

Address of Exchange School

Exchange School’s Headmaster /Principal’s Contact Details

Principal’s Name ___________________________ Phone Number ___________________________
Email ___________________________ After hours phone ___________________________

Exchange School’s Student Exchange Co-ordinator Contact Details

Co-ordinator’s Name ___________________________ Phone Number ___________________________
Email ___________________________ After hours phone ___________________________

Exchange Student’s Health and Wellbeing

To assist in responding to individual student needs please detail any circumstances that may affect your daughter’s participation in school life, socialization or welfare during school hours. These may include medical, physical, psychological, behavioural or cultural conditions. Failure to disclose any condition relevant to the School’s ability to educate the student may result in cancellation of the exchange.

Exchange Student’s Interests and Abilities

Please detail your daughter’s sporting, cultural and/or social justice interests, including any Clubs or Associations she may belong to.

Travel Arrangements

Outward Journey from Home:

Departure Date Day _____________ Month __________ Year ____________ From Home city ________________
Airline: ___________________________ Flight Number ___________________________ Departure Time ___________________________
- Via ___________________________ Arrival Time ___________________________ Departure Time ___________________________
- Via ___________________________ Arrival Time ___________________________ Departure Time ___________________________

Brisbane or Coolangatta

Arrival Date Day _____________ Month __________ Year ____________
Airline: ___________________________ Flight Number ___________________________ Arrival Time ___________________________

Return Journey Home from Exchange School:

Departure Date Day _____________ Month __________ Year ____________ From city ________________
Airline: ___________________________ Flight Number ___________________________ Departure Time ___________________________
- Via ___________________________ Arrival Time ___________________________ Departure Time ___________________________
- Via ___________________________ Arrival Time ___________________________ Departure Time ___________________________

Home City

Arrival Date Day _____________ Month __________ Year ____________
Airline: ___________________________ Flight Number ___________________________ Arrival Time ___________________________
Parents’ Consent

- I/we hereby give my permission for my daughter ____________________________ (full name) who currently attends ____________________________ (the “Exchange School”) to participate in the Student Exchange Program organised by St Hilda’s School and my daughter’s School.

- I/we confirm/agree that my daughter will visit St Hilda’s School at an agreed time and that I/we have already hosted/will host a student from St Hilda’s School at our home at an agreed time.

- I/we hereby give my permission for my daughter to participate in any St Hilda’s School excursions planned during her visit.

- Permission to swim under supervision Yes {  } No {  }

Please tick one of the following to indicate your child’s level of swimming proficiency in the water:

Non-swimmer {  }

Capable of looking after herself {  }

Proficient swimmer {  }

We acknowledge that:

1. I/we will be fully responsible for all travel and associated costs for my daughter’s visit to St Hilda’s School during the Student Exchange Period. I/we further understand that my daughter’s tuition, school excursions and local field trips, room, and board costs during the Student Exchange Period will be entirely covered by St Hilda’s School, or host family associated with St Hilda’s School. As an Exchange host, I/we agree to reciprocate and will cover room and board costs of a visiting student from St Hilda’s School during the Host Exchange Period and understand that my daughter’s school (the Exchange Host School) will cover all tuition costs, rental of uniform (where a reciprocal agreement exists), most school excursions and local field trips for the visiting St Hilda’s School student during the Host Exchange Period.

2. I/we agree to read and discuss with my daughter St Hilda’s School “Code of Conduct” booklet.

3. I/we agree that my daughter will attend and participate in all St Hilda’s School scheduled classes and activities, supervised excursions and field trips which are appropriate for her age group and class level, as may be determined by St Hilda’s School, and will not leave a class or excursion/trip without the express permission of the supervisory staff.

4. I/we give permission for my daughter to have access to St Hilda’s School’s computer network and the Internet. I/we exonerate and hold St Hilda’s School harmless for any liability should my daughter encounter any material that she or I/we may find objectionable.

5. I/we understand that our personal information will be disclosed to the Exchange Parents via the school’s interactive portal Parent Lounge. I/We understand that our daughter’s Exchange Parents will approve all excursions and incursions as appropriate, on my/our behalf, via Parent Lounge.

6. I/we confirm that I/we have disclosed all relevant information that may be necessary or advisable in order that St Hilda’s School and the host family may be fully aware of any medical or other condition pertaining to my daughter that may require special attention and to assist in their response to my/our daughter’s needs. This would include any information which may affect my/our daughter’s participation in school life, socialization or welfare during school hours such as medical, physical, psychological, behavioural or cultural conditions. Failure to disclose any condition relevant to the School’s ability to host the student may result in cancellation of the Exchange and the student sent home at the parent’s expense.

7. I/we hereby authorize any member of the supervisory staff at St Hilda’s School or any adult member of the host family to arrange for qualified medical attention for my daughter in any emergency situation, and further authorise the provision of such further or other medical treatment as in the opinion of such supervisory staff, acting on qualified medical advice, may be necessary in the circumstances which may exist. I/we understand that before giving any such authorisation, the supervisory staff shall have made reasonable efforts to contact me or the person(s) identified below, but agree that they may proceed in their discretion if unable to make such contact. I/We agree to pay any costs incurred for any medical advice or treatment.

8. I/We acknowledge that travel between home and Southport, at or in the vicinity of St Hilda’s School, and participation in St Hilda’s School’s supervised excursions, field trips and activities, may involve risks to my daughter’s personal health, safety, and well-being, including but not limited to disease, accidents, and acts of violence, foreseen or unforeseen.

9. I/we agree to discuss any other travel options during the exchange visit with the host family.
In consideration of my/our daughter being permitted to participate in the Student Exchange Program with St Hilda’s School, I/we hereby release St Hilda’s School, the Exchange School, their supervisory staff and other employees, directors, servants and agents, together with their respective heirs, administrators and assigns from any and all claims, demands, actions, cause and causes of action and liability for loss or damage of whatever nature or kind and however caused, and further undertake to indemnify and save harmless St Hilda’s School, the Exchange School, their supervisory staff and other employees, directors, servants and agents, together with their respective heirs, administrators and assigns, from and with respect to any and all claims, demands, actions, cause and causes of action by or on behalf of my daughter and any and all liability for loss or damage of whatever nature and however caused.

We understand that a place in the St Hilda’s School Exchange Program is offered on the following basis:

1. The student is to become an active member of St Hilda’s School and her host family, assuming duties and responsibilities normal to a student of her age.

2. The student is to participate as much as possible in the classroom and co-curricular activities of St Hilda’s School. The student will audit the classes in which she enrolls at St Hilda’s School; no academic reports will be issued.

3. The student is to follow all school rules and policies regarding school attendance, absence from school process, use of mobile phones etc. She will wear her own school uniform, or, where this is not applicable, will wear clothing that conforms to her own school dress code. This must, however, comply with St Hilda’s School regulations in respect to appropriate attire, jewellery, make up, nail polish etc.

4. The student must provide to St Hilda’s School, all relevant personal data, medical history, dietary and physical restrictions, if any. She must bring with her any necessary medication.

5. The student will be permitted to travel only with her host parents or proper adult chaperones or on school-sponsored functions. The Permission Form for Incoming Student on Exchange must be signed by the parents stating that they approve their daughter’s travelling outside the local area and that, if any accidents occur during such trips, all responsibility rests with the parents. Without this Permission Form, the student will not be permitted to travel outside the host area. Where the exchange student is in the Boarding House, permission for weekend/weekly leave will be sought by St Hilda’s School, in the usual way, from either the host family or the parents, as appropriate.

6. The student must respect the house rules of her host family and have their permission to go on social outings, telling them where she is going, who she is with, a contact telephone number at which she can be reached, and at what time she will return.

7. The student is to approach the relevant staff with any problems she may be experiencing.

The student shall return home if she:

(a) Is frequently absent from school;
(b) Uses alcohol, non-prescribed drugs of any sort, or tobacco;
(c) Drives a motor vehicle;
(d) Engages in sexual promiscuity as determined by the student’s school and the host school;
(e) Damages the image of her school or country in any way.

St Hilda’s School will provide:

(a) A host family, or in-school boarding accommodation as negotiated
(b) ‘In-school’ time as part of the programme;
(c) Full support to the student, with quick response time to problems;
(d) The opportunity to be involved in school excursions and trips, if feasible.

The parents of the student on exchange will provide:

(a) Round-trip airfare. Please note that these airfares are likely to be non-transferable and non-refundable. Insurance is highly recommended in case of unexpected withdrawal or cancellation. Tickets usually include insurance coverage (including medical cover) appropriate to the needs of the student’s travel from and stay in Australia.
(b) If, for any reason after being accepted into the Exchange a student withdraws or family circumstances prevent participation, the costs will not be borne by either school.
(c) Round-trip freight expense of accompanying and non-accompanying luggage;
(d) Miscellaneous personal expenses of accompanying and non-accompanying luggage;
(e) Passport and correct visa requirements;
(f) Miscellaneous personal expenses for visits to local shops, souvenir shops, the movies, etc, with the host family.
Signature of Both Parents Required

Signed by Natural Father

Signature: ..........................................................  Date: ..................................

Full Name: ............................................................................................................................

Signed by Natural Mother

Signature: ..........................................................  Date: ..................................

Full Name: ............................................................................................................................

Signed by Exchange Student

Signature: ..........................................................  Date: ..................................

Full Name: ............................................................................................................................

Please return completed form, together with a photocopy of the Exchange Student’s Passport to:

Mrs Kate Powell  OR  Mrs Tara Cuddihy
Student Exchange Co-ordinator  Head of Admissions
Email: kpowell@sthildas.qld.edu.au  Email: enrolments@sthildas.qld.edu.au

St Hilda’s School
PO Box 290
Southport  QLD  4215  AUSTRALIA
Fax: +61 7 5532 4056