

This Travel form is for
Sleep overs at another host family that will be reoccurring.
Once this form is approved please make sure you discuss with your host
family and they must confirm with other host parent for every sleep over.

Travel and activities request form

This form is to be used by [overseas students](#) participating in the Education Queensland International (EQI) homestay program ('homestay students'), who are seeking approval for non-routine travel and activities as specified in the EQI Standard terms and conditions.



Privacy Statement
<p><i>EQI is collecting the information on this form to assess your request for approval to undertake non-routine travel and activities. The information collected on this form may be provided to your parents, homestay provider, school and EQI. The information will be recorded, used and disclosed for the purposes of the principal (or delegate) on behalf of EQI considering and approving or declining to approve your request. This information may be used for behaviour management and to cancel your enrolment if you provide false or misleading information, or fail to provide relevant information. Your personal information may otherwise be used or disclosed where authorised or required by law.</i></p>
How to complete this form
<ol style="list-style-type: none"> 1. Complete Section A: Student details. 2. Complete Section B: Type of travel or activity. 3. Complete Section C, D OR E depending on the type of travel or activity selected in Section B. 4. Sign Section F: Student's agreement. 5. Give the form to your homestay provider and ask them to complete Section G: Homestay provider acknowledgement. 6. Follow your school's instructions about parent/legal custodian agreement (Section H). 7. Give the form to your international student coordinator to give to the school principal (or delegate) with all required supporting documents attached.

Important:

- Follow your school's instructions on submitting this form (e.g. timeframes) – please see your international student coordinator if you have any questions.
- Students **must not** book travel, accommodation and/or activities until approval has been provided.
- Students **must not** participate in high-risk activities, unless approved by EQI.
- You must keep your international student and/or homestay coordinator and homestay family informed of any changes to your emergency contact details.

Section A: Student details			
Student name:		School:	Chancellor State College
Date of birth:		EQI student ID:	Year level:
Insurance Provider:		Insurance policy number:	

Section E: Overnight stay at a friend's house			
Name of friend:			
Name of supervising adult: <i>Must be over 21 years old</i>			
Phone number:		Mobile number:	
Email address:			
Address of where you are staying:			
Is this an approved EQI homestay provider:	<input checked="" type="radio"/> Yes <input type="radio"/> No <i>(If Yes, "Section H: Parent Agreement" is not required)</i>		
Blue card number and expiry date (or equivalent) for supervising adult: <i>(If applicable)</i>			
<input type="checkbox"/> Regular overnight stays (provide dates)	Date/s:		
<input type="checkbox"/> One off overnight stay	Date:		
Details of overnight stay and travel/activities taking place: <i>Please provide as much detail as possible.</i>			

Section F: Student agreement

I declare that:

- I have read and understood the privacy notice on this request form;
- I have read and understood the requirements regarding Travel and activities, outlined in the Non-routine travel and activities for homestay students procedure and Sports, leisure and recreation provider procedure and [ISP standard terms and conditions](#); and
- All information provided in this request form is true and accurate to the best of my knowledge.

Department of Education, trading as Education Queensland International. CRICOS Provider Code: 00608A.

Travel and activities request form. Version 3.2 August 2021.

Uncontrolled copy. Refer to the Department of Education Policy and Procedure Register at <https://ppr.qed.qld.gov.au/pp/non-routine-travel-and-activities-for-homestay-students-subclass-500-schools-visa-procedure> to ensure you have the most current version of this document.

- I am aware of activity rules and conditions of entry for my nominated Sport, Leisure and Recreation provider.

Name:		EQI student ID:	
Signature:		Date:	

Section G: Homestay provider acknowledgement

I acknowledge that:

- the student, named in Section A of this form, who currently lives with me, wishes to participate in the travel or activity stated on this form; and
- final approval lies with the Principal (or delegate) identified below.

I support this request.

Name:		Email:	
Signature:		Date:	

Section I: International student coordinator or Homestay coordinator recommendation

I confirm that:

<input type="checkbox"/>	This form is complete and I have made all necessary enquiries to confirm the information provided.
<input type="checkbox"/>	I have considered all relevant circumstances including the nature of the activity, student suitability to undertake water activity has been checked (if applicable), arrangements for supervision, the student's welfare, age and maturity and the views of the student's parent and homestay provider.
<input type="checkbox"/>	I have checked that the company/organisation is listed on the Sports, Leisure and Recreation Provider list and if a waiver is required. <i>If yes, insert date checked:</i> Click or tap to enter a date . <i>If no, submit an application to EQI before approving.</i>
<input type="checkbox"/>	All support documentation and approvals are attached (includes waivers, email consent etc.)

I recommend that:

<input type="checkbox"/>	This request be approved		
<input type="checkbox"/>	This request be declined for the following reason/s :		
Name:	Heidi Imbrogno	Email:	hbarn37@eq.edu.au
Signature:		Date:	

Section J: Principal (or delegate) approval

<input type="radio"/>	I give permission for the student named on this form to travel or participate in the travel or activity stated above.		
<input type="radio"/>	I DO NOT give permission for the student named on this form to travel or participate in the travel or activity stated above.		
Reason for <u>not</u> granting permission:			
Name:	Audrey Hearn or John Holden		
Signature:		Date:	

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