MID-PACIFIC INSTITUTE
2445 Ka`ala Street • Honolulu, Hawaii 96822
Telephone: (808) 973-5178
Email: homestay@midpac.edu

HOMESTAY PROGRAM
RESPONSIBILITIES AND EXPECTATIONS
OF HOMESTAY STUDENTS AND PARENTS

The student’s homestay experience is to be regarded as a sharing of cultures and not simply as room-and-board accommodations. Mid-Pacific Institute homestay students are expected to behave in ways that bring honor to themselves, their parents, their host family, and to Mid-Pacific Institute.

GENERAL RESPONSIBILITIES AND EXPECTATIONS OF STUDENTS:

- Help with normal household chores.
- Keep his/her room and living space neat and tidy.
- Make every effort to adapt to his/her new lifestyle and to participate in the daily family routine.
- Make every attempt to speak English in the homestay whenever possible.
- Complete his/her bath within a reasonable time (20 minutes) so as to not infringe upon other family members.
- Adhere to the Mid-Pacific Institute rules and regulations.
- Discuss weekend or vacation plans in advance and get permission from host parent(s).
- Will not have visitors over unless permission is obtained in advance from host parent(s).
- Will call or notify host parent(s) whenever he/she will be home late.
- May be expected to use personal funds to purchase personal items and to pay for entertainment activities (Example: If the student wants to go to the movies with friends on the weekend).
- Highly recommended that before the homestay begins, parents set up a local bank account for their child to have access to extra money.
- Pay for all long-distance or international phone calls, including monthly bills for a personal phone or cell phone, and fees.
FOOD:
- It is the responsibility of the host family to provide a variety of nutritional, well-balanced meals (breakfast, lunch, and dinner) seven days a week.
- Student should fit in with the host family’s mealtime schedule as much as possible.
- Student is expected to help prepare food and clean up.
- School lunch may be purchased during the week with the host family providing the money for lunch.
- Dinner should be with the family.
- Homestay parents should be notified of any food allergies of the student. Other allergies such as medication and environmental causes should also be discussed.

TRANSPORTATION:
- It is the host family’s responsibility to arrange for transportation to and from school (including school activities such as sports practices and games, drama rehearsals, club meetings, etc.).
- If the student catches the bus or walks to school, it is highly recommended that the host parent(s) ride the bus with the student to and from school at least once before the start of the school year so the student is familiar with the system.
- It is the student’s responsibility to arrange transportation for non-school activities via local transportation or to coordinate transportation with the host family.

MEDICAL INSURANCE:
- All students are required to obtain their own U.S.-recognized medical insurance.
- Student must have a local physician before beginning the homestay program.
- It is also recommended that the student have a local dentist.

ADHERENCE TO HOST FAMILY RULES AND HAWAII STATE LAWS:
- Student will not engage in illegal activities. This includes, but is not limited to, the use of illegal drugs, underage alcohol consumption, and driving while under the influence of alcohol or drugs.
- It is illegal for anyone under the age of 18 to purchase or smoke tobacco.
- Reasonable weekday and weekend curfews will be established by the host family and must be adhered to by the student. Individuals under the age of 16 have a legal curfew of 10:00 p.m.
- Student will follow all rules established by the host family.
- Student will engage in open communication with host parent(s) regarding household guidelines.
- Student will respect the privacy and property of the members of his/her host family.
**TERMINATION OF THE HOMESTAY PLACEMENT:**
- Host families have the right to request that the student be removed from their home at any time.
- Student also has the right to request a move from his/her original placement at any time.
- In either case, the Homestay Coordinator must be contacted and an investigation into the matter will take place immediately with appropriate action to follow.
- Unless the student or any member of the host family is in imminent danger, both parties will need to adhere to the homestay contract until an appropriate placement change can occur.
- The Mid-Pacific Institute Homestay Coordinator has the right to remove a student from a host family’s home at any time if there is any indication that the well-being of either party is being compromised.

**HOMESTAY FEE:**
- The homestay cost is currently set at $1,500 per month and will be a direct transaction between the student’s family and the host family.
- The host parent will serve as the primary guardian and in the event of an emergency will have the medical power of attorney.
- Homestay fees must be paid by the first of each month, unless other arrangements have been made with the homestay family.

**ADDITIONAL HOMESTAY FEES:**
- An additional non-refundable annual $500 fee must be paid to Mid-Pacific Institute, which ensures the coordination and continued monitoring of the homestay placement and the inclusion of the homestay students at social and cultural events throughout the year.
- Coordination of homestay placement for new students will not begin until the $500 fee is paid.
- The $500 fee must be paid by returning students by August 1st of each year.

**STUDENT’S PARENT(S) RESPONSIBILITIES:**
- Parent(s) will assist the host family and student with the transition.
- Parent(s) will pay all costs and fees on time.
- Parents will be available for contact in case of emergencies.
- Parents will communicate openly with the Homestay Coordinator if there are any issues with the homestay placement.
- Parents will have the student arrive several days before the start of school to purchase school uniforms (Mid-Pacific Institute polo shirts, collared button-down shirts, covered shoes, socks, appropriate length shorts, jeans/pants), physical education uniforms, school books, and any bulky items like bed linens, towels, or other personal items that are required.
- Parents will ensure that the student has all of the necessary items to begin the school year and his/her homestay.
SUGGESTED LIST OF ITEMS FOR STUDENT:

- Cash or access to cash (establish local bank account) *
- U.S.-recognized medical insurance *
- Local physician *
- Passport/Visa for international students *
- Wallet
- Medications, including vitamins
- School supplies
- School bag or backpack
- Computer with internet capabilities
- Flash (thumb) drive
- Alarm clock
- Recreational clothing
- Underwear
- Pajamas/sleepwear
- Slippers
- Shoes and socks
- Swimwear
- Toothbrush and toothpaste
- Shampoo
- Comb and hairbrush
- Deodorant
- Soap
- Sunscreen
- Bed linens and towels (Communicate with your host family as to whether or not they will provide towels, sheets, pillows, blanket, etc.)

* = Required

BY SUBMITTING YOUR HOMESTAY APPLICATION, YOU AND YOUR PARENT(S) AGREE TO THE TERMS LISTED IN THE HOMESTAY STUDENT AND PARENTS’ RESPONSIBILITIES AND EXPECTATIONS.
STUDENT / PARENT APPLICATION

<table>
<thead>
<tr>
<th>Student: Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>FOR OFFICE USE ONLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth: _ _ / _ _ / _ _ _ _</td>
<td>Age</td>
<td>Current Grade</td>
<td>Gender</td>
</tr>
<tr>
<td>Home Mailing Address</td>
<td>Country</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone Contact Number [include area code or country code and city code]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td>English Proficiency</td>
<td></td>
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<tr>
<td>English Proficiency</td>
<td>Beginner</td>
<td>Good</td>
<td>Very Good</td>
</tr>
<tr>
<td>Father: Last Name, First Name, Middle Initial</td>
<td>Mother: Last Name, First Name, Middle Initial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td>Occupation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employer</td>
<td>How long?</td>
<td></td>
<td></td>
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<tr>
<td>Work Phone Number [include area code or country code and city code]</td>
<td>Work Phone Number [include area code or country code and city code]</td>
<td></td>
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</tr>
<tr>
<td>Email Address</td>
<td>Email Address</td>
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<tr>
<td>Health Insurance</td>
<td>Do you have health insurance?</td>
<td>Yes</td>
<td>No, I need to acquire health insurance.</td>
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<tr>
<td>Medical: Insurance Carrier</td>
<td>Dental: Insurance Carrier</td>
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QUESTIONNAIRE

1- Why would you like to participate in the Mid-Pacific Homestay Program?

2- What size and kind of family would you like to stay with? Why?

3- Do you have a special diet? If yes, explain. Please include likes, dislikes and any food allergies.
4- What are your hobbies or interests? Include sports and the arts.

5- Do you have any allergies or any special medical conditions? If yes, please list and explain.

6- Do you have a problem with pets in the home? If yes, please explain.

7- Do you have any special requests regarding your host family? If yes, please explain.

I verify that the information on this form is true and correct to the best of my knowledge.

Student’s Signature

Date

Father’s Signature

Date

Mother’s Signature

Date

Note: This form is invalid without the signature of the Student and Parent(s).
## Qualifications for Guardianship:
- Must agree to a full background check, including fingerprinting
- Must be at least 25 years old
- Must live on Oahu
- Must be proficient in conversational English

## Responsibilities of Guardianship:
- Act as liaison between parents and school in any emergency or special circumstance, including conferences between a school representative and the student
- Act on a student’s request for special permission
- Provide care and accommodations in case of illness
- Provide transportation to and from school on weekdays and weekends
- Provide transportation to and from medical appointments, emergency room visits and as circumstances may require
- Notify the MPI Homestay coordinator of any changes in contact information: address, phone numbers
- Notify the MPI Homestay coordinator if any alternate accommodations are arranged
## Mid-Pacific Institute - Homestay Program

INFORMATION, GUARDIAN, LIABILITY RELEASE AND PERMISSION FORM

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### GUARDIAN - HOST PARENT continued

<table>
<thead>
<tr>
<th>Host Father: Last Name, First Name, Middle Initial</th>
<th>Host Mother: Last Name, First Name, Middle Initial</th>
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<tbody>
<tr>
<td>Address</td>
<td>Address</td>
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<tr>
<td>Email Address</td>
<td>Email Address</td>
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<tr>
<td>Home Phone Number</td>
<td>Home Phone Number</td>
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<tr>
<td>Cell Phone Number</td>
<td>Cell Phone Number</td>
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### LIABILITY RELEASE AND PERMISSION

Homestay students are allowed to leave the host family’s residence and the campus as allowed by parent(s) and/or guardian, except when mandatory events require that the student remains in the area of the school activity. In the event that a student needs to break homestay curfew he or she will require prior approval from the guardian and verification for that particular event.

- **Parents**
  - give permission for the following:
    - Go off campus after school until homestay curfew on weekdays,
      (Sunday through Thursday: 6:45 PM)
    - Go off campus until homestay curfew on weekends,
      (Friday and Saturday: 10:00 pm)

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### Parent’s Agreement:

I certify that all information submitted on this form is accurate. I give permission for the host parent, Homestay coordinator and school nurse to share medical information with one another about my child that is deemed necessary for my child’s health care and safety in the homestay program. I agree that in giving my child permission to be off campus, I will not hold Mid-Pacific Institute, the staff members, nor the host family responsible and/or liable for injuries that might occur to him/her as a direct/indirect result of my child’s or another’s actions. I do not hold Mid-Pacific Institute, the staff members or the host parent liable for any damages that may result from their good faith care of my child. If I have any questions about the homestay program, I will not hesitate to contact the Homestay Coordinator.

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<tr>
<th>Father’s Signature</th>
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<td>Mother’s Signature</td>
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### Guardian’s Agreement:

I have read the above responsibilities and agree to be the Guardian of the above-named student. I understand and accept these responsibilities and will meet these expectations as the designated Guardian of this student.

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<th>Host Father’s Signature</th>
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<tr>
<td>Host Mother’s Signature</td>
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### Student’s Agreement:

I understand and agree to abide by the permission policies of the homestay program. I understand that these policies are designated to ensure the safety and security of the students living with host families, and I will be responsible for ensuring that I receive the required permissions PRIOR to leaving the host family residence. I give permission for the host parent, Homestay coordinator and school nurse to share medical information with one another that is deemed necessary for my health care and safety in the homestay program.

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<tr>
<th>Student’s Signature</th>
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### Homestay Coordinator’s Signature

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<tr>
<th>Homestay Coordinator’s Signature</th>
<th>Date</th>
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*Note: This form is invalid without the signature of the Student, Parent(s), Guardian(s) and Homestay Coordinator.*
MEDICAL POWER OF ATTORNEY

STATE OF HAWAII )
ss
City and County of Honolulu )

I, _____________________________ being duly sworn on oath, depose and say that in regards to my minor child(ren), ______________________________, I appoint ____________________________ to authorize any physician or surgeon to provide and perform any necessary immunization, test procedures, health examinations, medical care, and treatment including hospital admission and discharge, blood transfusions, anesthesia, and surgery.

____________________________
Parent’s Signature

Relationship to above-named minor(s): ________________

Subscribed and sworn to before me this _________ day of _________________________, 20______.

________________________________
Notary Public, First Judicial Circuit

My commission expires:

________________________________