Acknowledgement, declaration and agreement to be an EQI homestay provider

The following COVID-19 amendments have been updated to accommodate your acknowledgement, declaration and agreement before a student can be placed in your home. The department seeks to inform you of the risks and requirements of homestay during the COVID-19 pandemic.

I understand that if I am unwell (or anyone in my household and/or has been exposed to COVID-19 (through a close contact) prior to the students arriving, the placement will need to be suspended and the student placed with an alternative host to avoid putting the student at risk of contracting the virus. (Mandatory requirements while QHealth directives apply)		Yes	No [
I consent to the <u>QHealth steps</u> for managing a positive COVID-19 case and understand that the student and all households close contacts are required to isolate in my home for 7 days. (Mandatory requirements while QHealth directives apply)		Yes	No [
I acknowledge that the student cannot attend school until after they have reported a negative Rapid Antigen Test (RAT). If positive I will assist in reporting to QHealth and the school (1800 QSTUDY - afterhours). (Mandatory requirements while QHealth directives apply) I agree to meet the student at the airport on the day of their arrival and transport them to my residence in my		Yes	No [
personal vehicle. (Optional)		Yes	No	
I would like to be an emergency homestay provider (short-term) and can accommodate a student who is COVID-19 positive and requires seven days isolation. (Optional)		Yes	No	
Name of Homestay Provider Applicant 1:	Name of Homestay Provider Applicant 2	2:		
Signature Applicant 1:	Signature Applicant 2:			



