HOST FAMILY APPLICATION FORM

Application date:		Relationship of applicants:	
Name of applicant 1:		Name of applicant 2:	

Applicant 1

Family Name:			
Previous Name:			
Forenames:			
Other “known by” names:			
Date of Birth:		Age:	
Place of Birth:			

Applicant 1 Photo

Applicant 2

Family Name:			
Previous Name:			
Forenames:			
Other “known by” names:			
Date of Birth:		Age:	
Place of Birth:			

Applicant 2 Photo

Home Address:	
Date moved in:	
Local GP Address:	
Local Dentist Address:	

Identity

	Applicant 1	Applicant 2
Gender:		
Sexual Orientation:		
Nationality:		
Ethnicity:		
Primary Language spoken in home:		
Other Languages spoken in home:		
Religion or Faith Group:		
Practicing or Non-Practicing:		
Does the applicant identify as disabled?		

Relationship Status

	Applicant 1	Applicant 2
Relationship Status:		
If the applicant is living with a partner, date on which they set up a household together:		

Children Under 18 Living in the Household

Family Name	Forename(s)	Relationship to applicant(s)	Age	Gender

Adult Children Who May Visit the Household on a Regular Basis

Family Name	Forename(s)	Relationship to applicant(s)	Age	Gender

Over 18's Who May Visit the Household on a Regular Basis

Family Name	Forename(s)	Relationship to applicant(s)	Age	Gender

Enhanced DBS Check

	Applicant 1	Applicant 2
DBS Certificate Number:		
DBS Date:		
Organisation:		

Household Accommodation

Describe the home including the number of bedrooms, proposed sleeping arrangements and garden space.

Briefly describe the neighbourhood, community and access to key services.

Provide any details of any outstanding home safety issues.

Provide any details of household pets, including species, number and age.

Employment Details

	Applicant 1	Applicant 2
Is the applicant currently employed or undertaking voluntary work?:		
Name of current employer/ organisation:		
Current hours of work:		
Any planned changes to work:		
Any safeguarding or disciplinary issues? (If yes, give details):		

References

References ideally should be from current employer, but if not available, character referee details can be provided.

	Applicant 1	Applicant 2
Referee Name:		
Employer or Character Referee?:		
Company Name:		
Job Title of Referee:		
Email Address (professional if available):		
Contact Number:		

SHEFFIELD UNITED FOOTBALL CLUB