

St John's Anglican College

Homestay Self Risk Assessment Form



To be completed and submitted to the Homestay Coordinator with your homestay application to homestay@sjic.qld.edu.au.

DETAILS RISK ASSESSMENT FORM			
Date of Assessment:			
Homestay Family Name:		First Name:	
Street Address of Venue:			
Suburb:		Postcode:	
Home Number:		Mobile Number:	
Email:			
Household Details:			
Number of Adults living in the premises:		Number of Children under 18 years of age:	
Family members with current first aid qualifications:		Number of adults issued with a Blue Card:	
Medical Information – please provide the name of the nearest Doctor's Surgery / Hospital			
Name of Medical Facility:	Address Details:		Phone Number:

Please note:

Personal information that may be obtained, stored and released is done so in accordance with the *Privacy Act 1988*. For further information please refer to the college's *Privacy Procedure* at www.stjohnsanglicancollege.com.au.

Homestay Family Signature:

Submitted by:	
Signed:	
Date:	

Office Use Only:

Date Submitted:	
Administration Manager (International Program):	



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(Please refer to the example below to complete the Homestay Self Risk Assessment Form for your home on the following pages)

Area	Risks	Level of Risk (please circle one)	Risk Management Strategy
Environmental	<ul style="list-style-type: none"> Traffic Pollution Unfenced yard Cars Alcohol R rated movies Medication Pets Cigarettes Others (Poisons) 	<ul style="list-style-type: none"> low n/a low low low low low low low low 	<ul style="list-style-type: none"> Advise of cars speeding down street n/a Live on the Coast Ensure student aware of local traffic concerns Advise of licence requirements Complete regular stick takes Ensure parents lock on TV is switched on Students to store medication away from homestay children Introduce pets to student Parent to store cigarettes away from homestay children Parent to store poisons away from homestay children
Facilities	<ul style="list-style-type: none"> Swimming pool Exercise bike Renovation Tool shed 	<ul style="list-style-type: none"> High low n/a low 	<ul style="list-style-type: none"> Advise to keep gate shut at all times Instruct student how to correctly and safely use n/a Advise student to keep shed locked
Human	<ul style="list-style-type: none"> Visitors Other children Absence of supervision Work Staying overnight with another homestay family Travelling Unable to contact Illness Emotional stress Theft Relationships 	<ul style="list-style-type: none"> Major low low low low Medium Medium low low low Medium 	<ul style="list-style-type: none"> Advise student not to allow entry of unknown visitors Discuss privacy issues with homestay children Ensure house safety rules are followed Advise of own seasonal work commitments Ensure positive notification is received from other Homestay family Ensure car registered and road worthy Record student's mobile number and give out own emergency contact details Ensure medical attention is sought Advise of recent death in the family Ensure all doors and windows are locked Advise of recent family separation

SAMPLE



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Homestay Self Risk Assessment Form for (Please insert your family name) _____

Area	Risks	Level of Risk (please circle one)	Risk Management Strategy (Must be completed)
Environmental	<ul style="list-style-type: none"> Traffic 	low medium high	(Advise of cars speeding down street)
	<ul style="list-style-type: none"> Pollution 	low medium high	
	<ul style="list-style-type: none"> Fire 	low medium high	
	<ul style="list-style-type: none"> Cyclones 	low medium high	
	<ul style="list-style-type: none"> Unfenced yard 	low medium high	
	<ul style="list-style-type: none"> Cars 	low medium high	
	<ul style="list-style-type: none"> Alcohol 	low medium high	
	<ul style="list-style-type: none"> R rated movies 	low medium high	
	<ul style="list-style-type: none"> Medication 	low medium high	
	<ul style="list-style-type: none"> Pets 	low medium high	
	Facilities	<ul style="list-style-type: none"> Swimming pool 	low medium high
<ul style="list-style-type: none"> Exercise bike 		low medium high	
<ul style="list-style-type: none"> Renovations 		low medium high	
<ul style="list-style-type: none"> Tool shed 		low medium high	



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Homestay Self Risk Assessment Form for (Please insert your family name) _____

Area	Risks	Level of Risk (please circle one)	Risk Management Strategy (Must be completed)
Human	<ul style="list-style-type: none"> • Visitors 	low medium high	
	<ul style="list-style-type: none"> • Other children 	low medium high	
	<ul style="list-style-type: none"> • Absence of supervision 	low medium high	
	<ul style="list-style-type: none"> • Work 	low medium high	
	<ul style="list-style-type: none"> • Staying overnight with another homestay family 	low medium high	
	<ul style="list-style-type: none"> • Travelling 	low medium high	
	<ul style="list-style-type: none"> • Unable to contact 	low medium high	
	<ul style="list-style-type: none"> • Illness 	low medium high	
	<ul style="list-style-type: none"> • Emotional stress 	low medium high	
	<ul style="list-style-type: none"> • Theft 	low medium high	
	<ul style="list-style-type: none"> • Relationships 	low medium high	
	Others		

Date:

Signature: