



Housing Service Application & Airport Pick-Up Request Form

ServiceApplicationRev.10-09

Office Use Only

Date Received: _____

Date Processed: _____

What kind of service(s) you are requesting? Housing Service only Airport Pick-Up only Both Services

1. Student Information (Please print clearly)

Male Female Date of Birth: ____/____/____
MM/DD/YYYY

Last Name: _____

First Name: _____

Nick Name: _____

Country of Birth: _____ Citizenship: _____

E-Mail: _____

2. Emergency Contact Information

Name: _____

Address: _____

Relationship: _____

Telephone: _____

3. Course (Program) Information

Start Date: ____/____/____ End Date: ____/____/____

Housing Placement (Fee required: \$250.00)

If you are requesting housing service, please check the box at the top of this form. Please answer the questions and provide information if necessary:

I want the following type of housing:

- Homestay (\$900.00/30 nights. 2 meals included)
- Dormitory* (Shared room only \$450.00~\$500.00)
Meal Option (\$100.00 per 30 days) Yes No
- Hotel (upon availability)

When do you expect to move in and out?

IN: ____/____/____ OUT: ____/____/____
MM/DD/YYYY MM/DD/YYYY

How long do you plan to stay? _____ Weeks / Months

Airport Pick-up Request (Fee required: \$100.00)

If you are requesting airport pick-up service, please check the box at the top of this form and provide information below. If information is not available, it is your responsibility to contact us as soon as possible.

Arrival Information

Arrival Date: _____ Time: _____ AM/PM

Name of Airline: _____ Flight Number: _____

Departure City: _____

Please provide your arrival method if you do not use our pick-up service (i.e., taxi, friend): _____

You MUST notify us at least 72 hours in advance about your approximate arrival time for the dormitory or homestay so we can make proper arrangements for you.

I will be arriving at my homestay/dorm at _____ am/pm.

HOMESTAY ONLY

Please answer all of the following questions:

How well do you understand and speak English?

Beginner Intermediate Advanced

What language(s) can you speak? (If more than one, please list)

Is there any food that you do not eat? Yes No

If yes, please explain: _____

Do you have any allergies? Yes No

If yes, please explain: _____

Are you taking any medications? Yes No

If yes, please explain: _____

Do you smoke? Yes No*

*Smoking is NOT allowed at any homestay.

Can you stay with children? Yes No

Do you like pets? Yes No

Please tell us about activities/hobbies you enjoy:

Please write additional information we should know about your housing preferences: (use additional paper if needed)

FOR ALL STUDENTS

Please read the Terms & Conditions and Cancellation & Refund Policy* attached to application form and sign below:

"I have read and agreed to the terms & conditions and cancellation & refund policy. I also certify that information I provide on this form is accurate and complete."

Signature of applicant _____

Date _____

Signature of Agent or Guardian (in case applicant is under 18 years old) _____

All related questions **MUST** be answered and this form **MUST** be properly signed and dated or service(s) will not be arranged.

Please email, post or fax complete form to:

Cal America Education Institute

3700 Wilshire Boulevard, Suite 200 Los Angeles, CA 90010

FAX: 1.213.383.5110 Email: info@cal-america.com

* Dorm placement is for 4 weeks maximum unless extension is approved by CAEI.

* Visit <http://www.cal-america.com> for up-to-date information on terms & conditions, cancellation & refund policy, and pricing & fees.

E-mail inquiries to: info@cal-america.com.