

CHANGE OF HOMESTAY PROVIDER FORM 2020



ACS (International)

A Methodist Institution

STUDENT DETAILS

Name of Student	Name of Parent
-----------------	----------------

OLD HOMESTAY PROVIDER DETAILS

Name of Old Homestay Provider	Old Homestay Provider Contact No.
Old Homestay Provider's Local Address	Old Homestay Provider's NRIC
Old Homestay Provider's Email Address	

NEW HOMESTAY PROVIDER DETAILS

Name of New Homestay Provider	New Homestay Provider's Contact No.
New Homestay Provider's Local Address	New Homestay Provider's NRIC
New Homestay Provider's Email Address	

Is the Homestay provider also the Guardian to the student? Yes No

SIGNATURE

Parent's Signature _____ Date _____	New Homestay Provider's Signature _____ Date _____
--	---

FOR OFFICIAL USE ONLY

- New Homestay provider
 New Homestay provider with existing records in ACS (International)

Received by _____

Date _____