



Fax document to VIHSP office
Attn: Katrina Coll Fax: 250-592-6327

Please Print Legal Student Name: _____ Homestay family: _____ School: _____
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Departing Student Checklist

(For use by international students changing schools or leaving the program)

PLEASE NOTE: THE ACCURATE COMPLETION OF THIS FORM IS ESSENTIAL FOR THE REFUND OF THE STUDENT'S HOMESTAY DEPOSIT.

PLEASE ALLOW 10 BUSINESS DAYS FOR OUR ACCOUNTING DEPARTMENT TO PROCESS THE REFUND

To the Student: *Please check the box to the right when each item is completed*

School tasks:

- Cleaned and emptied school locker
- Returned all textbooks and library books
- Returned all sports equipment/uniforms
- Provided forwarding address to school office & program office
- Received school yearbook from school
- Paid all outstanding fees (if applicable)

The following charges are due to the school and remain unpaid by the student:

<i>Description</i>	<i>Unpaid balance owing</i>
Total owing:	

Confirmed by school staff: _____ **Date:** _____

Print Name/Title: _____