

(To be reviewed for each boarding house 6 monthly)

House: _____

Student Name: _____

Date of Birth: _____

Country: _____

Student No#: _____

Flat: _____

Room Number: _____

Head of House: _____

House
Address: _____

_____ Postcode: _____

Contact details: (H): _____ (M): _____

Email: _____

[illegible]

International students currently residing in the Boarding House

Name	Age	Gender	Year (currently attending)	Nationality	Length of stay

Type of residence ☐ Dorm
 ☐ Unit
 ☐ Private Room

Observations

	Yes	No
Fire Alarms installed		
Private Bedroom		
Shared Bedroom (how many share)		
Security		
Lockable doors to bedroom, bathroom and toilet		
A good quality bed and bedding		
Study desk with comfortable chair and lighting		
Wardrobe/Drawer space (incorporated within the wardrobe)		
Heating cooling - fan (depending on climate/season)		
Bathroom and toilet facilities close to the bedroom		
Laundry facilities		
Access to internet facilities		
Access to Common Room and Kitchen facilities		

WWC Checks for all Staff working in the boarding house	
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Additional comments: House layout Plan Highlighting Room

Date of check:

Date of previous check:

(if applicable):

Name of school representative:

Signed: