



EMERGENCY PROCEDURES FOR HOMESTAY FAMILIES

This information sheet contains information about what you need to do in case of an accident or emergency involving your international student. Please keep it in a safe place, e.g. on your fridge, on the family noticeboard, or by the telephone.

Waimea College's Responsibilities

Waimea College has responsibility in case of emergencies during and outside of school hours when the student is in a homestay. This means that Waimea College should be contacted as soon as possible in these situations. Waimea College will help and support you and make sure that all appropriate procedures are followed.

What to do in an emergency

Act appropriately (e.g. remove the student from the danger, apply first aid, and call an ambulance) **then**, if necessary, the school's **24-hour contact person**:

24 hour Emergency contact person:	Hayley Roper 021 024 22503
Homestay contact number:	Megan Wright 027 544 7927

Waimea College is responsible for contacting the international student's parents. **You are not responsible for this**, and in an emergency or accident, contact with the international student's parents should be made by **Waimea College only**.

In Case Of Accident or Illness

If an international student is injured or unwell and **your level of concern is high**, take the student to the nearest accident and emergency department or, if appropriate, dial 111 and ask for an ambulance. If your level of concern is low to moderate, take the student to your GP or, if time permits, call 544 6099 Ext 866 (Waimea College's number for advice during the day).

If you are concerned for your student's well-being and unsure of what to do, call the students' emergency contact for assistance as it is better to be cautious.

IN CASE OF EMERGENCIES please go to our website, www.waimea.school.nz OR our Facebook page, www.facebook.com/pages/Waimea-College-International-Students/194925070559187 for updates regarding any emergencies.

Your Student's Details:

Please complete these with your student:

Insurance Details (Company, Policy type, contact number):	Medical Concerns:	Allergies:	Previous Illnesses: