

INSTRUCTION FOR FORM FILLING

Please understand that this form is the first communication platform you would have with your host. As such, we encourage you to feel free to express your creativity and illustration when you are writing about yourself. You can use drawing or sketches to add more life into your writing. However, please do not forget to write legibly.

Recent Photo (3R Size)

N.B. We will prefer photo taken recently. You can either have a photo, which shows your face clearly or it would be even better if you can have a photo of your family and yourself.

**HIPPO EXCHANGE CLUB**

An International Exchange Club

(Affiliated to Hippo Family Club, Japan)

**PERSONAL INFORMATION SHEET
(PARTICIPANT)**

各人资料表格
(参加者)

Code No. (For Official Use)

Member Code

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Host

**** PLEASE FILL ALL INFO IN BLOCK LETTER**

PERSONAL INFORMATION / 各人资料

FULL Name (Underline SURNAME):						汉字姓名 (若有/ if applicable):					
Address:						Home Tel:			Handphone:		
						Office:			Other No.:		
School & Course / Company:				Level / Occupation:			Email:				
NRIC / Passport No.		Date of Birth (DD/MM/YY)		Age	Marital Status		Height	Weight	Gender		
		/ /					CM	KG	* MALE / FEMALE		
Food / Drink restrictions					Do You Smoke?			Do state if your family have any pets?			
					YES / NO						
Medical History / Illness						Allergy & Reaction					
What do you wish to accomplish on this homestay? Please write some messages to your latest family member. Your homestay starts after the submission of this application form.											

List of Hobbies / Interests / Sports

FAMILY INFORMATION / 家庭资料

Name	Age	Sex	Relationship	Occupation	Hobbies	Living Together
						Yes / No
						Yes / No
						Yes / No
						Yes / No
						Yes / No
						Yes / No
						Yes / No
						Yes / No

HOST FAMILY REQUEST / 寄宿家庭请求

FULL Name (Underline SURNAME):		Parent / Guardian Name (If Participant is a Minor)	
Address:			
Does This Family Knows You Are Coming? * YES / NO	Home Tel:	Handphone No.:	Email:
Your Relationship With This Family Name	In Year	Month	Stayed With This Family
Name	In Year	Month	Stayed With This Family

FOR OFFICIAL USE

Application Received On: _____

Result of Application * SELECTED / REJECTED

Remarks: _____

Special Health Condition That Needs Attention:

Other Issues That Needs Attention:
