

BUNKA Participant Application Form**Participant Information:**

First Name	Middle Name	Family Name

Mailing Address	Phone	Fax	Email

Nationality	First Language

Birthdate:**Education:**

Month/Day/Year	For current students name of school:

English:

How would you rate your current speaking ability:

Beginner	Intermediate	Advanced	Fluent

Current Occupation or Career Interests:**My hobbies include:****Emergency Contact Information:**

In case of emergency, contact:

Name	Phone	Fax/ Email

Medical Information:

Present Health Condition:

Excellent	Good	Fair

Do you have any allergies? Yes No
If yes, please explain:Are you taking any medication? Yes No
If yes, please specify:Do you have any medical conditions or health problems? Yes No
If yes, please explain:**Additional Information:**

Are you allergic to any foods?



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Are there any foods you do not like to eat?

Are you comfortable being placed in a family with pets?

Are you comfortable being placed in a family that smokes?

Do you smoke?

Previous Trips Abroad: (Please list)

How would your peers describe your personality?

Arrival Information:

Expected Date of Arrival in Vancouver:

Airline/ Flight Information:

Homestay Period:

From:

To:

Signature:

Date:
