## 10. Application form

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| **Application Form of the International Summer Camp** | | | |
| Name | | Gender | |
|  | |  | |
| Passport No. | | Nationality | D.O.B. |
|  | |  |  |
| Sending Institution | | | |
|  | | | |
| English ability (Non-English speaking students attach photocopies of supporting documents) | | | |
| Mother language（ ） | IELTS（ ） | TOEFT（ ） | CET（ ） |
| Contact No. | | Email Address | |
|  | |  | |
| Home Address | | | |
|  | | | |
| Name of Emergency contacts | | Telephone No. of Emergency contact | |
|  | |  | |
| Health condition | | | |
| Do you have a history of allergies | | If yes, please indicate the source of your allergy | |
| Yes（ ） | No（ ） |  | |
| Dietary requirements | | | |
| Vegetarian（ ） | Avoid spicy food（ ） | Bean allergy（ ） | None（ ） |
| Personal statement (including personal biography, the reason for attending the camp, and what to expect from the camp) | | | |
| Sending institution： | | Supervisor： | |
| Applicant's signature： | | Date: | |