



EduLink

OUTBREAK TOURS • OUTBREAK TOURS • OUTBREAK TOURS

FOREIGN EXCHANGE STUDENT QUESTIONNAIRE TWO RECENT PICTURES

Please complete the following questionnaire honestly, in ENGLISH, as this will provide us with vitally important information that will assist us in the planning of your trip in South Africa.

NAME of SCHOOL _____

SURNAME _____

NAME _____

DATE OF BIRTH _____ AGE _____ SEX _____

SCHOOL NAME _____ GRADE AT SCHOOL _____

YEARS ENGLISH AT SCHOOL _____ RELIGION _____

STREET ADDRESS _____ TOWN _____

POSTAL CODE _____ TELEPHONE AT WORK _____ AT HOME _____

NAME OF FATHER _____ OCCUPATION _____

NAME OF MOTHER _____ OCCUPATION _____

SOCIAL SECURITY NUMBER _____

HOW MANY BROTHERS/SISTERS DO YOU HAVE, AND WHAT ARE THEIR AGES? _____

HAVE YOU VISITED SOUTH AFRICA BEFORE? _____ IS THIS YOUR FIRST SCHOOL TRIP OVERSEAS? _____

IF NOT, WHERE HAVE YOU BEEN BEFORE? _____

WHAT ARE YOUR HOBBIES? _____

DO YOU DO SPORT? _____ WHAT KIND OF SPORT DO YOU LIKE? _____

DO YOU SUFFER ANY SERIOUS HEALTH CONDITIONS OR RESTRICTIONS? PLEASE GIVE DETAILS _____

CAN YOU SWIM? _____ ANY FOOD RESTRICTIONS? _____

HOW WOULD YOU DESCRIBE YOURSELF (UNDERLINE THE CHARACTERISTICS WHICH DESCRIBES YOU BEST):
SHY OUTSPOKEN SPONTANEOUS DEPENDENT INDEPENDENT SPORTING ADAPTABLE NON-ADAPTABLE
SOCIAL ANTI-SOCIAL FRIENDLY RESERVED HARDWORKING POPULAR INQUISITIVE REBELLIOUS QUIET

EMAIL ADDRESS :

YOUR SIGNATURE _____

SIGNATURE OF PARENT _____