Student Exchange with San Diego, USA Student Information Form

Rudolph Brandes Gymnasium

Attach your photo here! (You are encouraged to add more pages of additional photos of your family and interests.)

1. PERSONAL DATA

First and last name:	_
Address:	_
GenderGrade:	
Birthdate:	
Home Phone:	
E-mail of student:	
Father's name:	
Mother's name:	
E-mail of parents	
Sisters (names, ages):	_
Brothers (names, ages):	

Please remember that the best selection can only be made if your responses to the following questions are absolutely candid. Information concerning special health needs is crucial in an emergency. All information will be treated confidentially.

2. PERSONAL PREFERENCES Are there any smokers in your family? () yes, in the house () yes, but only outside () no Do you like animals? () yes () no To which animals are you allergic? () _____ () none Do you have pets at home? () yes _____() no Special interests or activities in the family: 3. SPARE TIME Please check (x) How do you spend your free time? -Reading What type of literature? -Playing Sports ____ What type? ____ - Playing a musical instrument Which one(s)? -Listening to music What type/band names? _____ -Movies Examples:____ -TV Example of shows:_____ -Computer Other spare time activities? To which school clubs/organizations do you belong?

In which organized (after school) activities do you participate?

What specific chores of	do you have t	o do at home?			
4. SCHOOL What are your favorite	e subjects?				
How far is your home	from school?)			
How will your guest a () by walking () by b () by car () by bus	, .	school?			
5. PERSONALITY I 1 = not at all or never 2 = slightly or rarely 3 = moderately/somet 4 = very much or ofter 5 = exclusively or alw extroverted	imes n ays		bout yourself	according t	to the following:
adaptable	_organized _				
stubborn	patient	calmliv	ely		
sense of humor	_group-orier	nted			
individualistic	easy-go	oingserious	ironic	shy	_talkative
open-minded	religious	adventurous	mature	_friendly	reliable
emotional					
others:					
Please list your FAVO Food:	ORITES:				_
Ice cream flavor:		TV-Show:			
Singer:		Group:			
Scent:		Sound:			
Sport to watch:		Sport to play:			
Athlete:		Actor:			
Movie:		Book:			
Website:					
Place in your house:					

Animal/Pet:	
Which three things would you take to a deserted island?	
What is your favorite German and English word and why?	
6. IN YOUR HOST FAMILY	
Would you mind sharing a room with your host brother or sister? () yes () no Will your guest have his/her own room? () yes () no Would you prefer to host a	
() girl () boy n () no preference Partner preference: () girl only () boy only () no preference () prefer girl, boy OK () prefer boy, girl OK	
How would you characterize your family?	
Please indicate (x) Easy-goingQuietSeriousFamily-orientedCommunicativeStrict	
What does your family like most? Attend sports eventsPlay gamesPlay musicHave family discussionsAttend cultural eventsEat meals togetherVacation together	

7. HEALTH INFORMATION / INFORMATION ZUM GESUNDHEITSZUSTAND Do you take a certain medication regularly? () yes () no If so, which? For what condition/reason? Do you have any allergies? () yes () no What are they? What has to be done if the allergy arises? Do you follow a special diet, either out of necessity or by preference? If so, please describe? **8. FURTHER INFORMATION WEITERE INFORMATIONEN** Further information which you consider to be important: I have answered this questionnaire truthfully and to the best of my knowledge.

Place, Date Signature of applicant

Place, Date Signature of parent or guardian

Please add English essay about yourself (at least one page) and a page with more photos!!!