STEP 2020 INFORMATION

GENERAL INFORMATION

|  |  |
| --- | --- |
| Legal Name *(****as shown on passport****)* |  |
| Date of Birth |  |
| Email |  |
| Cell Phone Number |  |
| Address |  |
| License Number *(state)* |  |
| Do you have a means of transportation for trainings and/or other events? |  |

FAMILY INFORMATION

|  |  |
| --- | --- |
| Parent/Legal Guardian *(relationship)* |  |
| - Phone Number |  |
| - Email Address |  |
| - Citizenship |  |
| Parent/Legal Guardian *(relationship)* |  |
| - Phone Number |  |
| - Email Address |  |
| - Citizenship |  |

PASSPORT & VISA INFORMATION

|  |  |
| --- | --- |
| Place of Birth *(city, state/country)* |  |
| Current Citizenship |  |
| Former Citizenship *(if any)* |  |
| Current Passport Number *(and expiration, if any)* |  |
| Current Chinese Visa Number *(and expiration, if any* |  |
| Emergency Contact *(required on visa application)* |  |

HEALTH & MEDICAL INFORMATION

|  |  |
| --- | --- |
| Health Condition/Concerns |  |
| Medication(s) |  |
| Health Insurance *(policy/medical record number)* |  |
| Do you wear glasses/contacts? |  |
| Is there anything that will prevent you from standing/walking for extended periods of time? |  |
| Dietary Restrictions *(allergies/dietary restrictions)* |  |

EDUCATION & WORK EXPERIENCE

|  |  |
| --- | --- |
| College/University |  |
| - Major, degree, year of (expected) graduation |  |
| High School |  |
| Current Employer *(if any)* |  |
| - Occupation or job title |  |
| - Address of employer |  |
| - Phone Number of employer |  |
| Career goals or ambitions |  |

LANGUAGE & TRAVEL

|  |  |
| --- | --- |
| Do you speak Mandarin? *If so, what level (beginner, intermediate, or advance)* |  |
| Do you speak Korean?*If so, what level (beginner, intermediate, or advance)* |  |
| Other than English and the above, what other languages do you speak at the intermediate or advanced level? |  |
| Major cities you have visited in China or Indonesia (if any) |  |
| Countries you have visited in Asia *(if any)* |  |
| Countries you have visited in past 12 months *(if any)* |  |

SKILLS, TALENTS, ABILITIES, ETC.

|  |  |
| --- | --- |
| Musical Instrument(s) and level  *(beginner, intermediate, or advanced)* |  |
| Can you sing or lead praise? |  |
| Hobbies |  |
| Experience with kids *(and age groups)* |  |
| Experience with teaching *(and age groups)* |  |
| Experience with public speaking |  |