

STUDYTOURS

遊學之旅

海外旅客個人檔案

NOTE: This form is best completed using the program Adobe Acrobat Reader. If Adobe Acrobat is not loaded onto your PC or Mac then you can download it for free from <https://get.adobe.com/reader>. You can also complete the form using the browser Internet Explorer.

PLEASE COMPLETE THIS FORM IN ENGLISH. ENSURE IT IS TYPED, NOT HANDWRITTEN.
請用英語填寫這份表格。請確保使用電腦打字，而非手寫。

PART A: VISITOR DETAILS A部分: 旅客個人資料

First name 名字 _____ Surname 姓氏 _____
Gender 性別 Male 男 _____ Female 女 _____
Date of birth DD/MM/YYYY 出生日期 日/月/年 _____ Age 年齡 _____
Nationality 國籍 _____

Emergency contact details of parent/guardian 緊急聯絡人 (父母 / 監護人)

Full name 全名 _____ Phone Number 電話號碼 _____
Address 地址 _____
Email 電郵 _____
Education 教育 _____
School name 學校名稱 _____
Current year in school 就讀年級 _____
Number of years studying English 學習英語的年數 _____

PART B: MEDICAL DETAILS B部分: 醫療資料

Do you have any allergies? 是否有過敏? No 否 _____ Yes 是 (please tick one) (請勾選一項)

If yes, include any food, animal and drug allergies (please provide full details and medication taken):
如有過敏的話，包含對任何食物、動物及藥物過敏 (請提供詳細資訊和您所服用的藥物):

Do you have any illnesses/medical conditions? 您是否有任何疾病 / 病況?

No 否 _____ Yes 是 (please tick one) (請勾選一項)

Include asthma, diabetes, epilepsy or anaphylaxis (If yes, you must advise treatment and medication taken including use of an adrenaline autoinjector e.g. EpiPen): 包括氣喘、糖尿病、癲癇或過敏性休克 (如有任何疾病，請務必告知您所使用的藥物及治療，例如使用腎上腺素自動注射器EpiPen):

Is there anything else in the visitor's history or circumstances not already advised that might pose a risk to students or staff in NSW government schools? 該旅客是否有任何經歷或情況尚未透露，但可能使新南威爾士州立學校的學生或校方人員處於風險之中?

No 否 _____ Yes 是 (please tick one) (請勾選一項)

(If yes, you must provide full details): (如果有，請務必提供詳細資訊):

PART C: HOMESTAY TAY C部分: 寄宿家庭

Only complete this section if DE International is arranging homestay
若由國際教育部為您安排寄宿家庭, 才須填寫這一部分

Placement preference
分配偏好

Single 單人
Double 雙人

Smoking preference
吸煙喜好

Non-smoking 不吸煙
No preference 沒有偏好
Outside only 僅限室外

Pets preference
寵物喜好

Prefer pets 歡迎寵物
No pets 禁止寵物
Outside pets only 僅限室外

Message to host family 給寄宿家庭的訊息

Family members 家庭成員

RELATION 關係	NAME 姓名	OCCUPATION 職業	AGE 年齡

Interests/Hobbies/Sports 興趣 / 嗜好 / 運動

PART D: PERMISSION TO PUBLISH AND CONSENT**D部分: 允許並同意發佈肖像**

I/we consent to the aforementioned overseas visitor named in this form, being photographed/filmed for publication within the NSW Department of Education's internet sites, social media, newspaper, external publication, television and on other associated promotional material. Note: You have agreed to participate in the study tour. We may collect photograph and film content for publication. If you choose to participate in the study tour, we may be unable to exclude you from any photograph or film content. 我 / 我們同意此表格上述提到的海外旅客, 將參與所有遊學之旅及寄宿家庭的活動 (無論是校內校外或寄宿家庭內外的活動), 包括任何由學校及寄宿家庭在遊學之旅中安排的郊遊及旅程。

Yes 是 No 否 (please tick one) (請勾選一項)

I/we consent to the aforementioned overseas visitor named in this form participating in all study tours and homestay activities (both on and off the school and homestay premises) including any excursions and trips arranged by the school and homestay provided during the program. 我 / 我們同意此表格上述提到的海外旅客, 若有任何緊急情況, 將使用救護車和 / 或接受視乎情況覺得必要的醫療或手術治療. 這可能包括但不僅限於住院, 醫生看診, 返回母國的交通, 以及與新冠肺炎相關的醫療照護和檢測。

I/we consent to the aforementioned overseas visitor named in this form, in the event of an emergency, using ambulance transportation and or receiving such medical or surgical treatment as may be deemed necessary. This may include, but not be limited to, placement in a hospital, use of doctor's services and transportation to the home country as well as COVID related medical care and testing. 我 / 我們瞭解陪行的成人須負擔因提供醫療照護及相關服務給海外旅客的全額, 如上所述。

I/we understand that the accompanying adult is responsible for all costs incurred in providing medical treatment and associated service to the overseas visitor, as aforementioned. 我 / 我們同意補償可能由此表格上述提到的海外旅客造成的任何損害, 給寄宿家庭或當地學校。

I/we agree to reimburse the host family or the local school for any damage the aforementioned overseas visitor named in this form may cause. 我 / 我們同意補償可能由此表格上述提到的海外旅客造成的任何損害, 給寄宿家庭或當地學校。

Signature of Parent/Guardian (if visitor under 18 years of age): 家長簽名 (如旅客未滿18歲):

Signature of Visitor (if over 18 years of age): 旅客簽名 (如旅客已滿18歲):

PLEASE USE YOUR DIGITAL SIGNATURE TO SIGN THIS FORM BEFORE RETURNING IT TO YOUR AGENT. IF YOU DO NOT HAVE A DIGITAL SIGNATURE, PLEASE PRINT THE FORM AND SIGN IT BEFORE RETURNING IT TO YOUR AGENT.
回覆給您的中介之前, 請使用您的電子簽名來簽署此表格. 如果您沒有電子簽名, 請列印這一表格並簽名, 再交還給您的中介。