

**OSAKA GIRLS' SENIOR HIGH SCHOOL
INTERNATIONAL PROGRAM APPLICATION**

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FAMILY INFORMATION (Continued.)

Mr. Mrs. Ms. Dr. Parent/Guardian's Full Legal Name

(Parent's Home Address) Number and Street City

(Parent's Home Address) State/Province Postal Code Country

Relationship to you Occupation

Employer Name Business Area Code and Telephone

Home E-mail Business E-mail

1. How many brothers and sisters do you have? Brothers: _____ Sisters: _____

2. What kinds of activities do you do together with your family? How often?

3. What chores are your responsibilities at home?

4. Describe your interests, hobbies, and activities.

5. List the one activity or hobby you would like to continue in Japan, *if possible*.

6. Which religious services, if any, are you interested in attending in Japan?

7. Do you have any diet restrictions? *IF YES, please describe.* _____

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HOST FAMILY PLACEMENT

1. Can you live in a home that has cats and/or dogs? _____

2. Can you live in a home where at least one person smokes? _____

3. Some host families may have a single parent, no children at home, or be younger parents under 30. Can you be considered for all types of placements? _____

4. Do you have any requests concerning a host family? *OGSHS will attempt to honor your request.*

ACADEMICS AND LANGUAGE STUDY

1. Circle the type of school you now attend. Homeschool Academic Magnet IB _____
OTHER. Specify.
NOTE: Homeschoolers need to be affiliated with a local USA high school before formal acceptance.

2. How many years of high school will you have completed when you begin school in Japan? _____
When do you expect to graduate from your home high school? *Write mon. and yr.:* _____

3. What academic subject do you like the most and why?

4. What is your native language? _____

5. What languages have you studied and for how many months and years? *Write languages on the lines provided and then indicate the years and months you have studied each. Include Japanese. Formal study refers to language courses taken in high school or at a university for which credit was received. Informal study refers to the non-credit study of a language in, for example, an international club.*

LANGUAGE	FORMAL STUDY TIME	NON-FORMAL STUDY TIME

NOTE: YOUR APPLICATION MUST CONTAIN A CURRENT ACADEMIC TRANSCRIPT.

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CERTIFICATE OF HEALTH AND INSURANCE (QUESTIONS 1, 2, AND 3 MUST BE COMPLETED BY A PHYSICIAN WHO HAS EXAMINED THE STUDENT IN THE LAST 6 MONTHS.)

1. Does the student have a medical, mental health, or behavioral symptom that will need to be treated while in Japan? IF YES, PLEASE SPECIFY.

2. Is the student on any prescription medication that will need to be continued in Japan? IF YES, specify what medication and the dosage and frequency. PLEASE NOTE: A few medications are restricted in Japan. Please have the student check with OGSHS. When traveling, students should carry a prescription for their medication and leave the medicine in its original pharmacy bottle.

3. In your opinion what is the overall state of the student's health? Explain your answer.

Physician's Signature: _____

Physician's Name (Print): _____

Physician's Address: _____

Physician's Address: _____

Physician's Phone with Area Code: _____

4. **All students MUST have health insurance in Japan.** If your current insurance will provide coverage, write below the company name, the policy number, and a phone number. **Provide OGSHS with insurance information prior to departure from your home country.**
