

# STUDY TOURS 游学项目处

## 海外访客情况表

**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.**

请用英文填写本表, 切勿手写, 请务必打字填写。

### **PART A: VISITOR DETAILS** A部分: 访客资料

First name 名

Surname 姓

Gender 性别

Male 男

Female 女

Date of birth 出生日期 (日/月/年)

Age 年龄

Nationality 国籍

#### **Emergency contact details of parent/guardian** 家长/监护人紧急联系资料

Full name 姓名

Phone Number 电话号码

Address 地址

Email 电子邮箱

#### **Education** 教育情况

School name 学校名称

Current year in school 目前在校年级

Number of years studying English 学习英语年数

### **PART B: MEDICAL DETAILS** B部分: 医疗详情

Do you have any allergies? 您是否有过敏情况? No 否 Yes 是 (*please tick one*) (请给一个选项打勾)

If yes, include any food, animal and drug allergies (please provide full details and medication taken):

包括对任何食物、动物和药物过敏 (如果回答“是”, 请务必提供全部详情和所服用的药物情况):

Do you have any illnesses/medical conditions? 您是否有任何疾病/症状? No 否 Yes 是 (*please tick one*) (请给一个选项打勾)

Include asthma, diabetes, epilepsy or anaphylaxis (If yes, you must advise treatment and medication taken including use of an adrenaline autoinjector e.g. EpiPen):

包括哮喘病、糖尿病、癫痫或过敏反应 (如果回答“是”, 请务必告知所接受的治疗和使用的药物, 包括使用肾上腺素注射笔, 如: 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? 在访客的过往经历或情况中是否有尚未告知的其它情况, 而这些情况可能会给新南威尔士州公立学校的师生员工造成风险? No 否 Yes 是 (*please tick one*) (请给一个选项打勾)

(If yes, you must provide full details): (如果回答“是”, 请务必提供全部详情):

**PART C: HOMESTAY C部分: 家庭寄宿****Only complete this section if DE International is arranging homestay**

(只有新南威尔士州教育部国际处安排家庭寄宿才需填写此部分)

Placement preference 安置住宿优先选择	Single 单人	Double 双人	
Smoking preference 吸烟状况优先选择:	Non-smoking 不吸烟	No preference 无所谓	Outside only 只在外面
Pets preference 宠物状况优先选择	Prefer pets 喜欢宠物	No pets 不要宠物	Outside pets only 只在外面
Message to host family 给寄宿家庭的留言			

**Family members 家庭成员**

RELATION 关系	NAME 姓名	OCCUPATION 职业	AGE 年龄

**Interests/Hobbies/Sports 兴趣/爱好/运动****PART D: PERMISSION TO PUBLISH AND CONSENT D部分: 发布许可和同意**

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. 本人同意对本表所具名的上述海外访客进行摄影/摄像并发布在新南威尔士州教育部互联网网站、社交媒体、报纸、外部出版物、电视以及其他相关宣传材料上。注意: 您已同意参加游学项目。我们可能会采用项目中某些照片或影像资料用于宣传, 而这些片段中可能会包含您的肖像或声音。

Yes 是 No 否 (please tick one) (请给一个选项打勾)

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. 本人同意本表所具名的上述海外访客参加所有游学项目和家庭寄宿活动(包括在学校和家庭寄宿场址内外), 包括学校和寄宿家庭家庭在项目期间提供的任何郊游和旅行。

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. 本人同意本表所具名的上述海外访客在紧急情况下使用救护车运送并且/或者接受可能被视为必要的内科或外科治疗。这可能包括但不限于住院、使用医生服务以及送回原居住国, 及COVID新冠测试治疗相关的医疗需求。

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. 本人明白, 随行成人负责承担为上述海外访客提供医疗和相关服务所产生的所有费用。

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. 本人同意对本表所具名的上述海外访客可能造成的任何损坏向寄宿家庭或当地学校做出赔偿。

Signature of Parent/Guardian (if visitor under 18 years of age): 家长/监护人签字(若访客未满18岁):

Signature of Visitor (if over 18 years of age): 访客签字(若访客年满18岁):

**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.**

请使用电子签名完成该表格, 并将其发送至您的中介。如果您没有电子签名, 请将表格打印后, 签署并发送回您的中介。