

Youth organizations involved		
Record of youth activity		
Participation in other international exchange programs (name of country, details, etc.)		
Mother tongue and foreign languages	Mother tongue:	Foreign languages:
Religion		
Food / other restrictions	Restrictions from Religions:	Allergies and other restrictions:
Case history/ Prescription drugs	Case history: _____ Prescription drugs:	
Smoking	_ Smoker_ _ Non-smoker	
Special skills		
Area of interests in Japan		
History of your travel to Japan (date, purpose of visit)		
Nearest international Airport		