



Connecting Lives, Sharing Cultures

FOR OFFICE USE

AFS ID: ..... Program Code :YP.....

**Your Cover Photo**



**About You**

FIRST NAME (NAME AS LISTED ON PASSPORT)		LAST NAME	
MIDDLE NAME		PREFERRED NAME	
GENDER <input type="checkbox"/> F <input type="checkbox"/> M	BIRTH DATE : DD / MMM / YYYY AGE :	HEIGHT	WEIGHT
ETHNICITY	CITIZENSHIP <b>THAILAND</b>	COUNTRY OF LEGAL RESIDENCY <b>THAILAND</b>	

**Contact Information**

HOME STREET ADDRESS			
CITY	STATE	ZIP CODE	COUNTRY <b>THAILAND</b>
PREFERRED PHONE NUMBER	HOME PHONE NUMBER	MOBILE PHONE NUMBER	
EMAIL ADDRESS			
If we want to mail you something, we should send it to : <input type="checkbox"/> The Home Address listed above <input type="checkbox"/> The Alternate Address listed below			
THE ALTERNATE ADDRESS			
CITY	STATE	ZIP CODE	COUNTRY <b>THAILAND</b>

Candidate Signature : (Signature as listed on passport) \_\_\_\_\_ Date : DD/MMM/YYYY