

Family Information Form of ZAFU International Students

浙江农林大学国际留学生家庭信息表

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				•	PERSON	AL DETAILS	1. 1		
Surname			7,		Forename(s)		/ /	Gender	
Nationality			7.5	5/	Passport No.	Y	اعَالِين ا	Date of Birth	
Address				7/	Phone No.			E-mail	
Emergency Contact		Name:			Relationship			Phone No.	
		•	ŀ	FAMIL	Y MEMBERS	/GUARDIAN'S	DETAILS		
	Relationship	Name	1	Age	Occupation	Annual Income	Health Status	Phone No.	E-mail
1			15	2 -					
2				5) \	10				
3				S		つみ			
4				Y			ANY /		
5				1	1	1	17/		
6					GA &	ELLA			
•				FIN	ANCIAL SUP	PORTER'S DE	TAILS		
Relationship		Name		Age	Occupation	Annual Income	Health Status	Phone No.	E-mail
*Ple	ease ensure to attac	ch a copy of official	income	certifica	te of your finance	cial supporter as w	ell as an official	proof that shows y	vour relationship.

The information i have provided is complete, truthful and correct. I agree to bear all the responsibilities thereof if there is found to be any false information or fraud above.

Signature:

Date: