**Registration Form for 2017 Summer School**

**Central China Normal University Wollongong Joint Institute**

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| --- | --- | --- | --- | --- |
| **Last Name** |  | | | **Picture** |
| **First Name** |  | | |
| **Gender** |  | | |
| **Date of Birth**  **(month-date-year)** |  | | |
| **Place of Birth** |  | | |
| **Height** |  | | |
| **Nationality** |  | | |
| **Phone** |  | **E-mail** |  | |
| **Domestic Permanent Address** |  | | | |
| **Passport Number** |  | | | |
| **University** |  | | | |
| **Food Restriction** |  | | | |
| **Interests**  **and Hobbies** |  | | | |
| **Education Background** |  | | | |
| **Motivations**  **for the Summer School** |  | | | |