

Application Form

STUDENT:

Student Name:

Student Education level:

Address:

Telephone:

Email:

GUARDIAN:

Guardian full name:

Phone Number:

Telephone:

WeChat ID (optional):

1. What are your overall career objectives?
2. How did you hear about SLAP? What aspects most appeal to you and why did you apply? How much time per day/week do you plan on committing to the program?
3. What activities and/or hobbies demonstrate your leadership, creativity and uniqueness?