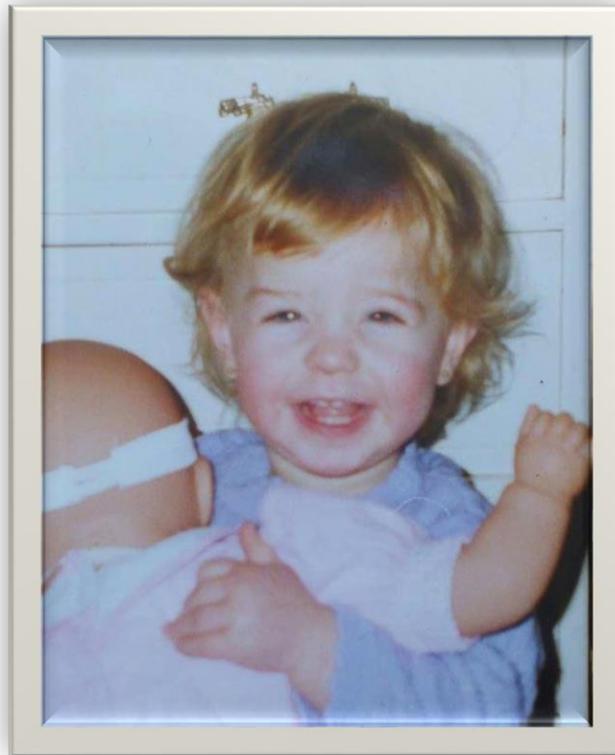


**Donor #: KV - 0011018**

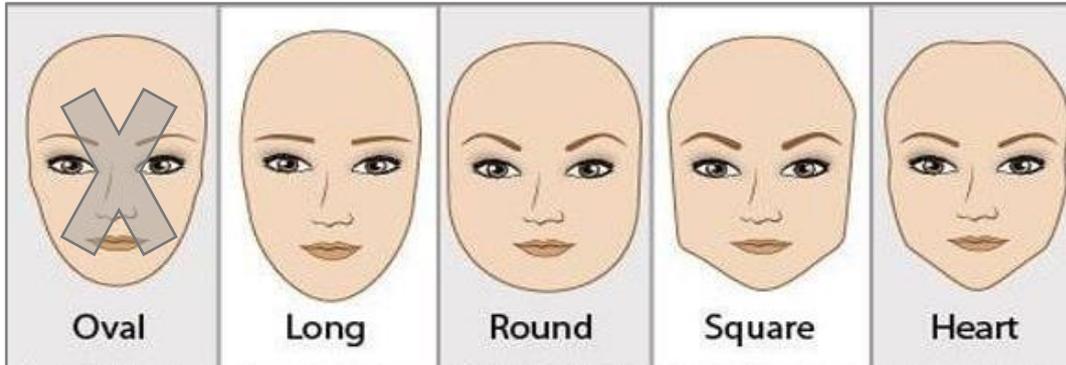


**SHORT PROFILE INFORMATION**

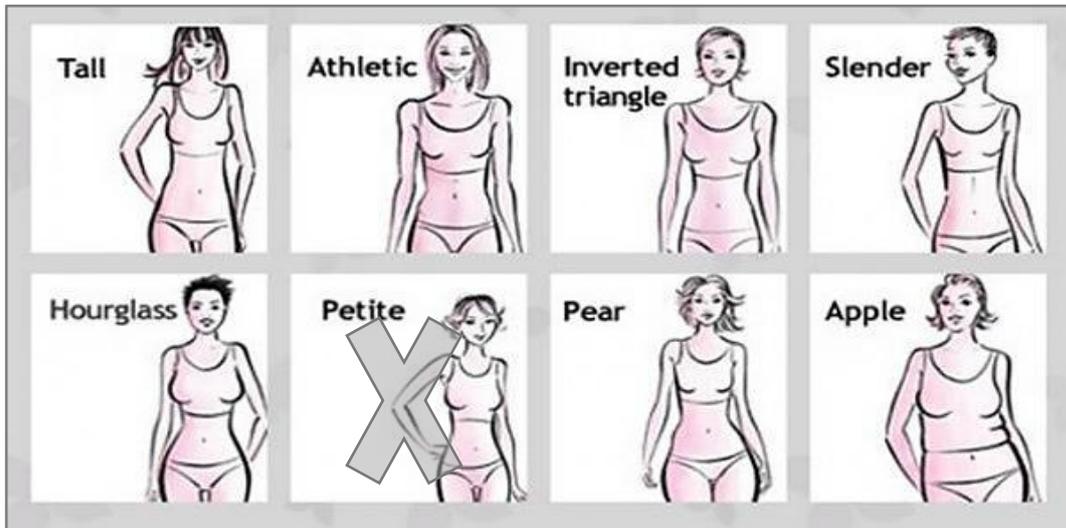
Ethnic Group/Race	White
In which country were you raised	South Africa
Where do you live	Cape Town
Will travel for donation if not in Cape Town	Yes
Date of Birth	02 May 2000
Are you adopted	No
Complexion	Fair
Weight	58
Height	1.7
Eye Colour	Blue
Natural Hair Colour	Blonde
Natural Hair Texture	Thick

## FURTHER DETAILS ON PHYSICAL CHARACTERISTICS & FEATURES

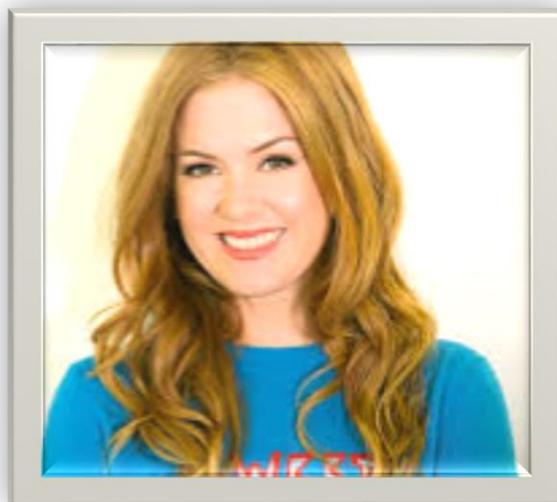
Prominent Hand	Right Handed
Blood Group if known	O+
BMI	20.07
What is your most attractive feature?	My eyes
Do you have any dominant features?	Semi plump lips
Please choose the option below which best resembles your shape face?	Oval



Please choose the option below which best resembles your natural body type?	Petite
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This donor best resembles this celebrity:	Isla Fisher
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## FAMILY CHARACTERISTICS

Please complete the table below: *Only include blood relatives and not step/half relatives.*

Family Member	Age	Eye Colour	Hair Colour	Height
Mother	46	Blue	Blonde	167
Father	45	Hazel		176
Sibling 1	22	Blue	Light Brown	177
Sibling 2				
Maternal Grandmother	65	Blue		176
Maternal Grandfather	83	Blue	Light Brown	155
Paternal Grandmother	87	Green	Light Brown	172
Paternal Grandfather	80	Blue/green	Dark Brown	179

## PERSONALITY & CHARACTER

Do you have any special interest in sports, hobbies or organizations?	Figure skating and dancing.
What excites and motivate you in life?	Meeting new people. I love meeting new faces and i try be the best i can be for others .
What saddens you in life?	Losing those close to me and seeing all the things going wrong in the world. All the violence breaks my heart.
What character/personality do you have that you are most proud of	Confidence, compassion , empathy , selfless and humble.
What dreams do you have for yourself?	To strive to be the best i can be. To make everyone that loves me dearly proud. To take a step to make a change and to help others.
How would your best friend describe you?	" shes a go getter and goal driven. Shes extroverted and bubbly. Shes confident and very much a peoples person , she knows how to light up any room and knows what she wants in life"
Who do you look up to in life and why?	Role model figures as they put themself aside for others and fight so hard for equal rights and fight to make a change.
If you had more money than you needed, what would you do with it?	Help my family and I'd donate it to the less fortunate. I would try my very best to try give back to the community.
If you could spend a day with anyone in the world (living or deceased) who would it be and why?	One of my best friends that passed away. Nearly two years ago she decided to take her life. I would love to spend the day with her.
Why would you like to become an egg donor?	I'd like to become a egg donor to help people reach their dream of having a family. If i could help in anyway, i will do it. I want to help people.
What message would you like to send the prospective parents?	I really do hope my eggs help. I really do hope that you reach the dream of being able to be parents. Itll be such a beautiful process and blessing.
Have you donated before?	No

## FAMILY HERITAGE

Detail your Heritage in the table below:

Family Member	Country of Birth	Origin / Race
Mother	South Africa	Caucasian
Father	South Africa	Caucasian
Maternal Grandmother	South Africa	Caucasian
Maternal Grandfather	England	Caucasian
Paternal Grandmother	South Africa	Caucasian
Paternal Grandfather	South Africa	Caucasian

## EDUCATION & EMPLOYMENT

Did you enjoy school and why?	Primary school no , i was bullied
How would you describe your performance at school?	I did fairly well. Im a 70% - 80% student
Did you receive a Grade 12/Matric pass If no state why?	Yes
Did you achieve any special awards or merits at school or thereafter?	Yes. I received medals for dancing and received certificates for choir and poetry
Which were your favourite subjects?	History and English
Do you have current or future education goals?	Yes. I want to reach and study for my Masters in Law
Please detail any post school diplomas/degrees/certificates that you embarked on or graduated from?	None
What would be your ideal job/way in which to spend your working days, if money was not an issue?	Being a Lawyer , fighting for the rights of people. Helping people
Are you currently employed? Please provide details.	No
Do you have any long term career/work orientated goals? Please elaborate.	Yes. I plan to eventually go overseas to work with children

## MEDICAL HISTORY

Do you have any current or past medical problems? If so please indicate whether current or past and provide details	No
Are you currently taking any medication prescribed by a Doctor? If so please detail for what condition and for how long you have been taking the medication.	No

## MEDICAL HISTORY (CONTINUED)

Do you have any genetic or hereditary medical conditions?	No
Have you ever taken, or are you currently taking, any mood medication/s. <i>E.g. Anti-depressants, anti-anxiety, mood stabilising medications?</i> If so please detail the medications.	Yes. Nuzak. I am no longer on it and haven't needed or taken it in about a year to two years.
Have you ever been under the care of a psychologist/psychiatrist? If so please provide details/reasons, indicating when you last saw the professional	Yes. Nearly two years ago
Do you have any life threatening allergies? If so please explain.	No
Do You smoke cigarettes?	Yes
Do you consume alcohol and if so, how many drinks on average per week?	No
Do you exercise and if so how many times per week?	Yes. Three times a week

## REPRODUCTIVE HISTORY

Have you ever been pregnant?	No
How many children (excluding any adopted children) have you birthed?	None
Have you had any miscarriages and if so, please provide details or why and when.	No

## FAMILY HEALTH HISTORY

Family Member	Age (or)	Age of death	Reason for death
Mother	46		-
Father	45		-
Sibling 1	22		-
Sibling 2			-
Maternal Grandmother		65	Heart attack
Maternal Grandfather		83	Old age
Paternal Grandmother		87	Old age
Paternal Grandfather		80	TB

## FAMILY HEALTH HISTORY (CONTINUED)

If you know that you are a Carrier or Non-Carrier of the conditions below, please indicate below with the date that you were tested, if known.

Condition	Yes/No	Date Tested
TaySachs disease	No	
Sickle Cell disease	No	
Thalassemia	No	
Cystic Fibrosis	No	

Are there any known genetic or hereditary medical conditions which are present in yourself or any family member, or conditions have been passed from one family member to another?	No
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Please indicate whether you do or have/suffered from any of the following:  
If one of your family members suffer from the condition, please indicate who suffers.

Condition	Yes / No	Who? Details / Outcome
Acne	No	
ADHD	Yes	My brother
Alcoholism	No	
Anaemia	No	
Arthritis	Yes	Grandmother
Asthma	No	
Blindness	No	
Blood Transfusion	No	
Cancer	Yes	Uncle
Cataracts	No	
Cerebral Palsy	No	
Cleft Palate	No	
Deafness	No	
Depression	No	
Diabetes	Yes	Great grandmother
Downs Syndrome	No	
Dwarfism	No	
Eczema	No	
Emphysema	No	
Endometriosis	No	
Epilepsy	No	

Condition	Yes / No	Who? Details / Outcome
Glaucoma	Yes	Grandmother
Haemophilia	No	
Heart problems	No	
High Blood Pressure	Yes	
High Cholesterol	No	
Kidney Disease	Yes	Grandfather
Learning Disability	No	
Leukaemia	No	
Liver Disease	No	
Migraines	Yes	Grandfather
Multiple Sclerosis	No	
Muscular Dystrophy	No	
Osteoporosis	No	
Ovarian Cysts	No	
Psychological Disorders	No	
Senility before age 50	No	
Spina Bifida	No	
Tuberculosis	Yes	Great grandfather
Thyroid Disease	No	
Ulcers	No	
Other	No	

ADDITIONAL DONOR PHOTOS (IF ANY)

