

**Donor #: VJ -0010419**



**SHORT SUMMARY PROFILE**

Race	Mixed race Japanese
Region	Cape Town
Will travel to Donate	Yes
Date of Birth	04 January 1995
Nationality	South African
Are you adopted	No
Do you have any biological children	No
Is there a history of twins in your family	No
Have you ever donated before	Yes, July 2019

## PHYSICAL CHARACTERISTICS

Height	1.6
Weight	55
BMI	21.48
Eye Colour	Hazel
Natural Hair Colour	Black
Natural Hair Texture	Thick
Complexion if Caucasian	-
Complexion if Black or Indian	-
Prominent Hand	Right

## CELEBRITY LOOK

This donor best resembles the following celebrity:

Kim Yoo Jung

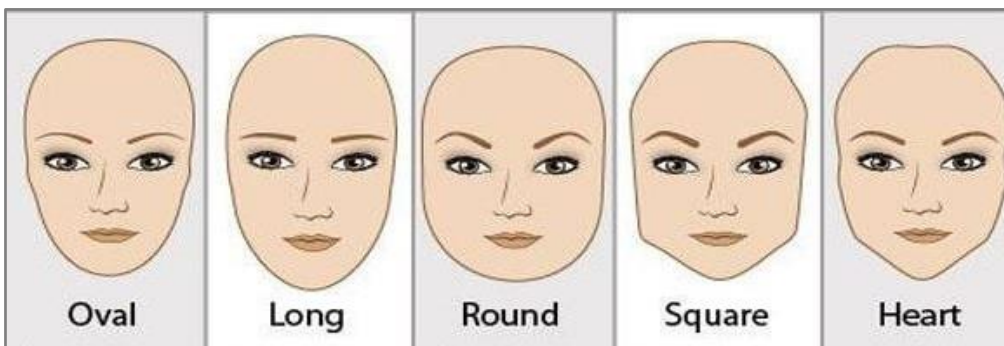


## FACE & BODY SHAPE

### FACE SHAPE:

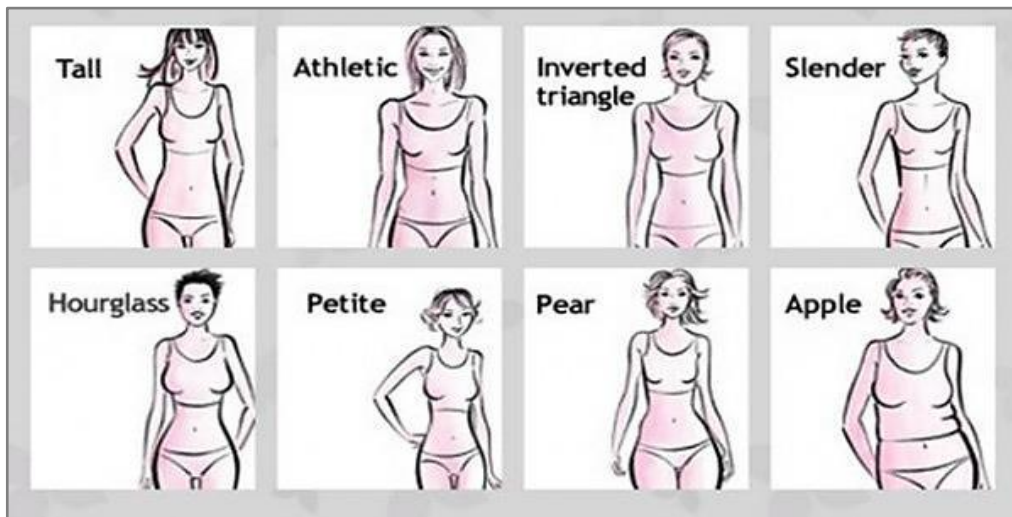
Which shape below best represents your shaped face

Oval



**BODY TYPE:**

Which body type below best represents your body	Petite
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**PERSONALITY & CHARACTER**

Describe your personality	Composer
Describe how you think others see you	Friendly
What excites and motivate you in life	My support structure(Family) and just all that life has to offer
What saddens you in life	Crime, death
What is most important to you in life	Family
What character/personality trait do you have that you are most proud of	Motivation
What personal dreams and goals do you have for yourself	To finish my Financial Accounting studies and to one day be successful
Who do you look up to in life and why	All my elders, they always give the best advice
If you had more money than you needed, what would you do with it	Donate It to charity or 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	My mom :)
Do you have any hobbies or special interests	I do horse riding as a hobby and Accounting interests me

**DONATION INSIGHTS**

Why have you decided to become an egg donor	To give to those who struggle
What special message would you like to send the prospective parents	All the best :) and the richest of blessings

## LIFESTYLE

Describe your general health	Excellent
Do you smoke cigarettes? If so how many per days	Yes about 6
Do you consume alcohol? If so how many units per week	I do not drink
How would you describe your diet	Average
Do you exercise? If so how many times per week	Everyday
Have you excelled in any sports and/or do you play any competitive sports	Yes, I played A league hockey in high school

## EDUCATION & EMPLOYMENT

How would you describe your performance at school/marks achieved	Average
What is your highest completed High School Grade	12
Which were your favourite subjects	Consumer Studies
Did you achieve any special awards or merits at school or thereafter	Yes
Please detail any post school diplomas/degrees/certificates that you achieved	Currently doing by Diploma in Financial Accounting, ive passed with all 70%
How would you describe your level of intelligence	Average
Are you currently studying or planning to study. Please elaborate	Planning on doing my Financial accounting degree
Are you currently employed? Please provide details.	Genesis Accounting & Payroll.I work as an assistant
Do you have any long term career/work orientated goals? Please elaborate	Yes, I plan on opening my own accounting firm
What would be your ideal job/way in which to spend your working days, if money was not an issue	Working as a financial accountant however being my own boss

## DONORS PARENTS

Detail	Mother	Father
Race	White	Japanese
Origin/Heritage	South African	Japan
Eye Colour	Blue	Brown
Natural Hair Colour	Blonde	Black
Height	Unsure	Unsure

## FAMILY MEDICAL HEALTH HISTORY

### FAMILY HEALTH STATUS:

FAMILY MEMBER	Health Status (excellent/ good, poor)	If deceased, age and cause
Mother		36, Cancer
Father		-
Sibling 1	Excellent	-
Sibling 2	Excellent	-
Sibling 3	Excellent	-
Sibling 4		-
Maternal Grandmother	Excellent	-
Maternal Grandfather		55, Heart attack
Paternal Grandmother		-
Paternal Grandfather		-

### GENETIC TESTING:

Condition	Yes/No
TaySachs disease	No
Sickle Cell disease	No
Thalessemia	No
Cystic Fibrosis	No

### MEDICAL HISTORY:

Condition	Who Suffers	Details/ Outcome
Acne	No	
ADHD	No	
Alcoholism	No	
Anaemia	No	
Arthritis	No	
Asthma	No	
Allergies	No	
Blindness	No	
Blood Transfusion	No	
Cancer (type & age of onset)	Yes	Mother had Colon Cancer
Cataracts	No	
Cerebral Palsy	No	
Cleft Palate	No	
Deafness	No	
Depression/Mental Illness	No	
Diabetes (if insulin dependent at what age)	No	
Downs Syndrome	No	
Dwarfism	No	
Eczema	No	

Condition	Who Suffers	Details/ Outcome
Emphysema	No	
Endometriosis	No	
Epilepsy	No	
Fertility Issues	No	
Glaucoma	No	
Genetic/Hereditary Diseases	No	
Haemophilia/bleeding disorder	No	
Heart problems	Yes	Maternal Grandfather had a heart attack
High Blood Pressure	No	
High Cholesterol	No	
HIV/Aids	No	
Kidney Disease	No	
Learning Disability	No	
Leukaemia	No	
Liver Disease	No	
Migraines	No	
Multiple Sclerosis	No	
Muscular Dystrophy	No	
Osteoporosis	No	
Ovarian Cysts	No	
Senility before age 50	No	
Spina Bifida	No	
Substance Abuse	No	
Tuberculosis	No	
Thyroid Disease	No	
Ulcers	No	
Other	No	

#### ADDITIONAL DONOR PHOTOS (IF ANY)

