

# APPLICATION FORM

## INTERNATIONAL SUMMER SCHOOL AT TOKUSHIMA 2019

Photo

Please type in English and submit to the International Office of your university

### Personal Details

Family Name:	<input type="text" value="In Chinese Character ( )"/>	First Name:	<input type="text" value="In Chinese Character ( )"/>
Date of Birth:	<input type="text" value="DD"/> <input type="text" value="MM"/> <input type="text" value="YYYY"/>	Sex and Age:	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="text" value=""/> yrs old
Nationality:	<input type="text"/>	Passport No:	<input type="text"/>

### Current Contact Information

Country:	<input type="text"/>	Phone (Home):	+ ( ) -
Address:	<input type="text"/>	Phone (Mobile):	+ ( )
		Email:	<input type="text"/>

### Affiliation

University Name:	<input type="text"/>	Field of Your Study:	<input type="text"/>
Country:	<input type="text"/>	School Year:	<input type="text"/>

### Emergency Contact to Your Home/Family

Name:	<input type="text"/>	Relationship:	<input type="text"/>
Address:	<input type="text"/>	Phone:	+ ( ) -
		Email:	<input type="text"/>

### RELIGION & FOOD

What is your religious affiliation?

Please list any food you cannot eat because of your religion or allergy:

<input type="text"/>
<input type="text"/>

### MEDICAL INFORMATION

Do you have any allergies or other medical requirements?

Yes  No

If Yes, please give details:

<input type="text"/>
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If you have any pre-existing medical conditions, please give details:

**Insurance is compulsory for attending this program.** Since Japanese National Health Insurance is not available for short stayers, all foreign attendants must have Medical/Travel insurance before arrival in Tokushima. Please submit a copy of your insurance certificate by July 21 (FRI).

**DEPARTURE/ARRIVAL INFORMATION**

Departure Date:	DD	MM	YYYY	Departure Time:	:	<input type="checkbox"/> AM <input type="checkbox"/> PM
Flight No.:				Departing Airport		
Arrival Date:	DD	MM	YYYY	Arrival Time:	:	<input type="checkbox"/> AM <input type="checkbox"/> PM
Flight No.				Arrival Airport:		
Arrival Time in Tokushima (expected):						

**NOTE: The check-in date at the hotel is August 6, 2019.** Be sure to check in on the day. Hotel information will be informed on a later date.

**AREA OF INTEREST FOR ON-CAMPUS STUDY TOUR**

What ACEDEMIC field are you interested in the on-campus study tour?

**LANGUAGE PROFICIENCY**

*Japanese*

Have you ever learned Japanese? Yes No

- If Yes, how do you assess your current Japanese level? Beginner Intermediate Advanced

Have you ever stayed in Japan? Yes No (If Yes, \_\_\_\_\_ months)

Do you understand lectures or guidance in Japanese? Yes No

*English*

How long have you studied English? \_\_\_\_\_ years

How do you assess your current English level? Beginner Intermediate Advanced

Do you have any official English test score? (e.g. TOEIC,TOEFL) Yes No (If Yes, test \_\_\_\_\_ score\_\_\_\_\_ )

Do you understand lectures or guidance in English? Yes No

**STUDENT DECLARATION** This part must be filled out by the applicant or by the parent/guardian if the student is under 20.

*On this Application Form, I declare my wish to enroll your Summer School.* Yes No

*I declare the information in this application and any attachments to be true and correct.* Yes No

*Date of Declaration (DD/MM/YYYY):* \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

