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Application Form – Japan Resident

1. Personal Information

Family name:	_____	First names:	_____
Sex:	<input type="checkbox"/> M <input type="checkbox"/> F	Occupation:	_____
Age:	_____	Birthdate:	_____
Nationality:	_____	Native language(s):	_____
Home address:	_____		
Telephone:	_____	Cell phone:	_____
Fax:	_____	Email:	_____

2. Japanese Ability

Please check your Japanese level:

1. Speaking/Listening

<input type="checkbox"/> Complete Beginner	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Upper Intermediate	<input type="checkbox"/> Advanced
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2. Reading

<input type="checkbox"/> Complete Beginner	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Upper Intermediate	<input type="checkbox"/> Advanced
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3. Writing

<input type="checkbox"/> Complete Beginner	<input type="checkbox"/> Beginner	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Upper Intermediate	<input type="checkbox"/> Advanced
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Please list any Japanese exams you have passed (with scores, if available):

If you are planning to take any further Japanese exams, please list them:

3. Course of Study

Please select the course or courses you are interested in, and preferred number of lessons per week.

Japanese Conversation	Japanese & Culture	Japanese through Pop Culture	Japanese for Exams
<input type="checkbox"/> Intensive (20 lessons / month)	<input type="checkbox"/> Intensive (20 lessons / month)	<input type="checkbox"/> Intensive (20 lessons / month)	<input type="checkbox"/> Intensive (20 lessons / month)
<input type="checkbox"/> Private __ lessons / week	<input type="checkbox"/> Private __ lessons / week	<input type="checkbox"/> Private __ lessons / week	<input type="checkbox"/> Private __ lessons / week
<input type="checkbox"/> Group __ lessons / week	<input type="checkbox"/> Group __ lessons / week	<input type="checkbox"/> Group __ lessons / week	<input type="checkbox"/> Group __ lessons / week

Foundation Course (4 lessons)

If you selected the Japanese Culture course above, please select your interests from the list below:

<input type="checkbox"/> Japanese flower arrangement	<input type="checkbox"/> Other art
<input type="checkbox"/> Japanese tea ceremony	<input type="checkbox"/> Military arts
<input type="checkbox"/> Calligraphy	<input type="checkbox"/> Religion/spirituality
<input type="checkbox"/> Ceramics	<input type="checkbox"/> Customs

Have you ever studied any Japanese culture; if so, what?

If you selected the Japanese Through Pop Culture course, please select your interests from the list below:

<input type="checkbox"/> Manga/Anime	<input type="checkbox"/> Music
<input type="checkbox"/> Movies	<input type="checkbox"/> Television

Have you read Japanese manga, watched movies, or listened to Japanese music before? Describe in as much detail as you can.

Preferred start date: _____

I hereby declare that I have read and agree to abide by all the relevant conditions.

Signature/name: _____ Date: _____