Registration Number

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| Gender:  M / F | Date of Birth: (year/ month/day)  Year month day | |
| First Name： | | Family Name: |
| Which class would you like to attend? Please check all possible options.   * Level 1, Group A: Tuesdays 17:50-19:20, and Thursdays 19:30-21:00 (Entry-level course) * Level 1, Group B: Thursdays 17:50-19:20, and Saturdays 17:40-19:10 (Entry-level course) * Level 2: Wednesdays 19:30-21:00, and Saturdays 16:00-17:30 * Level 3: Wednesdays 17:50-19:20, and Fridays 19:30-21:00 * Level 4: Tuesdays 19:30-21:00, and Fridays 17:50-19:20 | | |
| Are you currently a student? ( Y / N )  If yes, which school? Major?  If no, what school did you last attend? Major? | | |
| Work place and position, if you work: | | |
| Email address that you can access everyday: | | Mobile Number: |
| Please answer the questions below briefly:   1. What is the level of your present knowledge of Japanese language? Check one.   (None / up to 50 words and/or some letters / Other: Please describe)   1. Have you taken any Japanese course before? ( Y / N )   If yes, please explain:   1. Why are you applying for this course? **(No** more than 100 words) | | |
| Would you like to receive information on cultural events from the Embassy of Japan? ( Y / N ) | | |