<u>Personal Information Sheet</u> If you fill out this Personal Information Sheet, data will be copied to all the documents.

Your informatio	n			
Full Name				
	Last	First	Middle	
カタカナ	T .			
	Last	First	Middle	
University / Col	lege Attending			
Major				
Date of Birth -		YYYY-MM-DD		
Age (as of April 1 st	2024)			
Nationality		Place of E	Birth	
E-mail Address				
Phone Number				
Address				
_				
Parent's Informa Full Name	ttion			
	Last	First	Middle	
			Relationship	
E-mail				

Doshisha Women's College of Liberal Arts

Japanese Language Immersion Course 2024

Application Form

1. Personal Information

Full Name (As seen in your passport)

	,	First	Middle	
Last	,	First	Middle	
Date of Birth		Age	(as of April 1st, 2024)	
Nationality]	Place of Birth	Marital Status	
University / College Currently Att		ing	Married Single Major	
E-mail Address				
Phone Number _				
Address				
Name and Addr		Guardian to Contact in (Case of Emergency Relationship	
E-mail		1.00		
Address				
(Tel: . Educational B	ackground (Note: P) lease write all the schools a	attended in chronological order)	
	Name of School	Location		Year(s) Month(s
Elementary School			Year Month to,	Yea Mont
Junior High School			, to,, Year Month	Yea Mon
Senior High School			to,	Year Mont

Year

Year

Year

Month

Month

Month

Year

Year

Year

to

to

Month

Month

Month

Year(s)/

Month(s)

Year(s)/

Month(s)

3.Term Options

College

 \mathbf{or} University

Please check off the term for which you would like to apply.

Term A (4 weeks) Term B (4 weeks) Term A and B (9 weeks)

 □ Homestay □ Off-campus dormitory (Mukaijima Gakusei Center -Single Room) □ No preference Every effort will be made to accommodate your request. However please note that in some cases, you may be offerer accommodation for which you did not request. 5. Personal Questions [1]Do you have any allergies? □ Yes □No If yes, please describe in detail. (e. g. Allergies to foods, drugs, or plants, etc.) [2]Do you have any diet restriction? □ Yes □ No If yes, please describe in detail. (e. g. Vegetarian, Vegan, Kosher, Food allergies, etc.)
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accommodation for which you did not request. 5. Personal Questions [1]Do you have any allergies? □ Yes □No If yes, please describe in detail. (e. g. Allergies to foods, drugs, or plants, etc.) [2]Do you have any diet restriction? □Yes □No
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[2]Do you have any diet restriction?
If yes, please describe in detail. (e. g. Vegetarian, Vegan, Kosher, Food allergies, etc.)
[3]Do you have any disease or physical disabilities?
If yes, please describe in detail. (e. g. Diabetes, Celiac disease, Chronic ailment, etc.)
[4]Do you smoke?
 6. Passport and Visa Information (The information in following questions is required by the Immigration Authorities.) Passport Information Do you already have your passport? □Yes □No
*If yes, please fill out below blanks. If no, please send us a copy of your passport as soon as you get one.
Passport Number Date of Issue
Issuing Authority Date of Expiration
Past entry into/stay in Japan Yes No
*Fill in the followings when the answer is "Yes"
How many time(s) Latest Entry to
■ Visa Information (If a visa is required)
Place to Apply for Student Visa in your country
(The nearest Japanese embassy/consulate general)
I hereby declare all statements contained in this application to be true and correct.
Name

Date _____ Signature of Applicant

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4. Accommodation Options