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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: Mondays 17:50-19:20, and Wednesdays 19:30-21:00 (Entry-level course)[ ] 　Level 2: Tuesdays 19:30-21:00, and Fridays 17:50-19:20[ ] 　Level 3: Tuesdays 17:50-19:20, and Thursdays 19:30-21:00 [ ] 　Level 4: Mondays 19:30-21:00, and Thursdays 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?   |
| If you are employed, work place and position: |
| Email address that you can access daily: | Mobile Number: |
| Please answer the questions below briefly:1. Have you taken any Japanese course before? ( Y / N )
2. If YES, which course and which level? Please explain:
3. If NO, what is the level of your present knowledge of Japanese language? Check one.

(None / learned Hiragana/Katakana / Other: Please describe)1. Why are you applying for this course? **(No** more than 100 words)
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| Would you like to receive information on cultural events from the Embassy of Japan? ( Y / N / already receiving) |