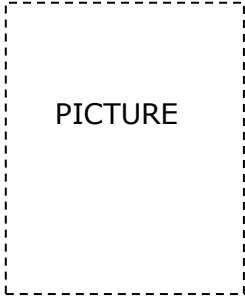


# "SAY YOU LOVE THIS WORLD! 2011"

## APPLICATION FORM

(2011/ / )

FAMILY NAME			
GIVEN NAME			
ADDRESS (Japan)			
AFFILIATION (school etc)			
COUNTRY		PASSPORT No.	
TELEPHONE No.		MOBILE (if any)	
E-mail		DATE of BIRTH (DD/MM/YY)	
BLOOD GROUP		SEX	MALE / FEMALE
OVERSEAS EXPERIENCES (list countries and reasons for visit)			
LIST ANY FOOD YOU ARE UNABLE TO EAT DUE TO RELIGIOUS OR PERSONAL REASONS (if any)			
<b>HEALTH CONDITIONS</b> - List allergies and regular medication, if any.  - Smoking or Non-smoking			
<b>LANGUAGE PROFICIENCY</b> -English: <input type="checkbox"/> can manage daily conversations <input type="checkbox"/> Fair <input type="checkbox"/> Fluent -Others:			
THE SUBJECT(S) YOU ARE STUDYING OR HAVE STUDIED (majoring, etc.)			

<p>WORKSHOPS OR LECTURES YOU ARE CAPABLE OF PRESENTING DURING THE PROGRAM IF ANY</p>
<p>YOUR COUNTRY DISH YOU CAN COOK (During the program, we are planning to cook your country dish together.)</p>
<p>YOUR PARTICULAR INTERESTS ABOUT JAPAN.</p>
<p>WHAT KIND OF PROBLEMS DO YOU HAVE IN YOUR COUNTRY? PLEASE LIST UP 3 PROBLEMS YOUR COUNTRY IS CURRENTLY FACING.</p>
<p>WHAT KIND OF TOPICS DO YOU WANT TO DISCUSS IN THE PROGRAM? PLEASE LIST 3 TOPICS OR MORE.</p>
<p>WHAT IS YOUR BASIC MOTIVATION TO APPLY FOR THE PROGRAM? WHAT DO YOU EXPECT TO LEARN FROM THE PROGRAM?</p>

**NOTE: Please understand that we will NOT be responsible for any accidents and injuries that happen to you before/after the program.**

***Thank you for your applying.***

***We really hope to see you in the program!!***



## PEACE CHILD TOKYO

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