Shimane University Summer School 2019 Application Form

• Please fill in Arabic numerals, years in Anno Domini(A.D.) system, proper nouns in full and not abbreviated.

		Date: (Yea	r)/(Month)/([Day)
APPLICANT'S DATA	Family Name *As shown in your passport			
	First Name *As shown in your passport			
	Middle Name *As shown in your passport			
	Age			
	Sex	☐ Male		☐ Female
	Date of birth (Year/Month/Day)		/	/
	Marital Status	☐ Married		☐ Single
	Nationality/ Citizenship	Nationality	/1	Nationality2
CONTACT INFORMATION	Address			
	Post-code			
	Country			
	Telephone			
	E-mail * Please fill your active address so that Shimane University may send you important notice by e- mail.)			
HOME UNIVERSITY	Name of University			
	Country			
	Major			
	Current School Year/Grade			

		Name/		
LANGUAGE PROFICIENCY	English	Proficiency □None □Beginner □Intermediate □Post-intermediate □Fluent		
		Exam Score (Attach a certificate of TOEFL or the other exam if you are a non-native speaker)		
	Japanese	Proficiency □None □Beginner □Intermediate □Post-intermediate □Fluent		
		Exam Score (If you took any)		
		How many classroom instruction hours have you completed in Japanese language during high school/university?		
		The title and publisher of your current textbook		
	Other Language	Proficiency □None □Beginner □Intermediate □Post-intermediate □Fluent		
	*If you can speak any foreign language other than Japanese, English, please fill in.	Exam Score (If you took any)		
YOUR INTEREST IN JAPAN	What about Japan are you interested in?			
CONFIRMATION OF APPLICATION	Are you SURE of joining this Shimane University Summer School if your application is accepted? (*Cancellation after application submission is not acceptable)			
	(Please Check) YES INO			