

International Supporters Request Form

Family Name					
First (or Given) Name		Date of Birth	Year	Month	Day
Affiliation	School/ Graduate School			Department/ Major	
Status at University of Toyama	select one		Other Please Specify ()		
Name of Supervisor/ Advisor		Will you have a tutor in Univ Toyama?		select one	
Entry Date to Japan	Year☒	Month☒	Day	Arrival Date in Toyama	Year Month Day
Period of Stay	Years/ Months		Have you ever stayed in Japan for long-term?	select one	
JASSO Scholarship	select one		Government Scholarship Student	select one	
Contact Information in Japan (If you have)	〒 Address TEL				
E-mail Address					
Nationality			Native Language		
Japanese Level or Any Foreign Language Level You Speak	(Answer Examples) I can communicate in general daily conversations such as how to use transportation/ I can speak in very simple daily conversations/ I can communicate with simple words and gestures/ etc.				
	Other languages				
Accompanied Family Members	select one (If yes, fill in the family relations. If you have children, their age and whether they attend schools.)				
Request for Support (Check support-needed items)	<input type="checkbox"/> Pick-up at Toyama airport or station <input type="checkbox"/> Moving into the University housing or an apartment <input type="checkbox"/> Resident registration at City Hall <input type="checkbox"/> Opening a bank account <input type="checkbox"/> Connecting mobile phone <input type="checkbox"/> Grocery shopping				
Others	(If you need any support other than the above, please specify.)				

※ All personal information contained in this application form will be properly protected based on the "University of Toyama Policies on Personal Information Protection".