Applicants	from	overseas
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◆Please choose the course you would like to enroll.

Short term Course

Date	1	1	
Date	,	,	

Application for Admission to ECC Japanese Language Institute

□ 5 wee	ks	From	Year	Month	Day	~	Year	Month	Day	
☐ 3 mon	ths	From	Year	Month	Day	~	Year	Month	Day	
Name								Nationality	у	
Date of Bir	th	Year Month Day						Gender	Male / Fema	le
relephone		Home coun	try:					Passport		
		In Japan:						No.		
Address										
Japanese)	Beginner / Elementary / Intermediate / Advance								
Language Abil	lity	(none ~ JLPT N5) (JLPT N5 ~ N4) (JLPT N4 ~ N3) (JLPT N2 ~ upper)								
Occupation	n	Student / Employed / Others (
Education Last school		(Year of graduation))		
Sponsor If the applicant is under 20, fill in this part.		Name						Telephone	Э	
	nt	Address								
Housing Introduction		Request for Student Dormitory								
		OddCilOH	Unnecessary							
Flight Info	,	Departure	Date	- 	Time		Airp	ort	Flight No.	
Flight IIIIO.	<i>)</i> .	Arrival	Date	-	Time		Airp	ort		

♦Please attach a passport photocopy (the page with a photo).

ECC Japanese Language Institute Sasatomi Bldg. 4F 4-9-1 Masaki, Naka-ku, Nagoya-shi 460-0024 Japan TEL: 81-(0)52-678-3144 FAX: 81-(0)52-671-2931 Email: jpknym@ecc.co.jp