



JAPAN

**STUDENT APPLICATION FORM**
**Kizuna Project : Pacific - Japan Youth Connection**
**Instructions**

1. Please write the following information **clearly**. You can either post your application form to c/o Kizuna Project Coordinator, Office of the Deputy Vice-Chancellor (Administration & Regional Campuses), University of the South Pacific, Laucala Campus, Fiji; or email to vadapareti\_s@usp.ac.fj; or deliver to a USP campus near you.
2. If this form is incomplete, inaccurate or not signed, it will not be considered;
3. The deadline to submit applications is **July 31, 2012**.

Photo (taken within 3 months).

Please write your name on the back of your photo.

H:4.5×W:3.5cm

**1. Personal Information**

\* Please fill in the form in BLOCK LETTERS.

|      |   |                      |                      |
|------|---|----------------------|----------------------|
| Name | Full Name (Exactly the same as your passport) |                      |                      |
|      | English                                       |                      |                      |
|      | Given Name                                    | Family Name          | Middle Name (if any) |
|      | <input type="text"/>                          | <input type="text"/> | <input type="text"/> |

|               |                                     |     |                            |                            |
|---------------|-------------------------------------|-----|----------------------------|----------------------------|
| Date of Birth | <input type="text"/> Day/Month/Year | Sex | M <input type="checkbox"/> | F <input type="checkbox"/> |
|---------------|-------------------------------------|-----|----------------------------|----------------------------|

|  |                                       |   |                                |                                     |                                      |                                 |                                  |
|--|---------------------------------------|---|--------------------------------|-------------------------------------|--------------------------------------|---------------------------------|----------------------------------|
| Country of Citizenship                     | <input type="checkbox"/> Cook Islands | <input type="checkbox"/> Federated States of Micronesia | <input type="checkbox"/> Fiji  | <input type="checkbox"/> Kiribati   | <input type="checkbox"/> Marshall Is | <input type="checkbox"/> Nauru  | <input type="checkbox"/> Niue    |
|  | <input type="checkbox"/> Palau        | <input type="checkbox"/> PNG                            | <input type="checkbox"/> Samoa | <input type="checkbox"/> Solomon Is | <input type="checkbox"/> Tonga       | <input type="checkbox"/> Tuvalu | <input type="checkbox"/> Vanuatu |
| Country Currently Residing and Studying in | <input type="checkbox"/> Cook Islands | <input type="checkbox"/> Federated States of Micronesia | <input type="checkbox"/> Fiji  | <input type="checkbox"/> Kiribati   | <input type="checkbox"/> Marshall Is | <input type="checkbox"/> Nauru  | <input type="checkbox"/> Niue    |
|  | <input type="checkbox"/> Palau        | <input type="checkbox"/> PNG                            | <input type="checkbox"/> Samoa | <input type="checkbox"/> Solomon Is | <input type="checkbox"/> Tonga       | <input type="checkbox"/> Tuvalu | <input type="checkbox"/> Vanuatu |

|          |                      |                                     |
|----------|----------------------|-------------------------------------|
| Passport | Passport Number      | Date of Expiry                      |
|          | <input type="text"/> | <input type="text"/> Day/Month/Year |

\*\* You must have a valid passport to be eligible to apply, or obtain a passport by August 2012.

|                 |                      |                      |                      |
|-----------------|----------------------|----------------------|----------------------|
| Current Address | Address              | Tel:                 | Fax:                 |
|                 | <input type="text"/> | <input type="text"/> | <input type="text"/> |
|                 | Mobile:              | Email:               |                      |
|                 | <input type="text"/> | <input type="text"/> |                      |

|  |                       |                      |
|--|-----------------------|----------------------|
| Parent or Contact Person in Emergency<br><small>*If you live with him/her, please leave address blank.</small> | Full Name             | Relationship         |
|  | <input type="text"/>  | <input type="text"/> |
|  | Address               | Tel:                 |
|  | <input type="text"/>  | <input type="text"/> |
|  | Mobile:               | Email:               |
|  | <input type="text"/>  | <input type="text"/> |
|  | Profession/Occupation |                      |
|  | <input type="text"/>  |                      |

|         |  |                              |                             |
|---------|--|------------------------------|-----------------------------|
| Consent | Do you have your parents'/guardians' consent to travel to Japan? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|         | Do you have your school's consent to travel to Japan?            | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|         | Have you traveled outside your country before?                   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

**2. Academic Details**

|                                       |                                |                            |
|---------------------------------------|--------------------------------|----------------------------|
| Information of Your School/University | Name of Your School/University | Location: (city, province) |
|                                       | <input type="text"/>           | <input type="text"/>       |
|                                       | Grade/School Year:             | Tel:                       |
|                                       | <input type="text"/>           | <input type="text"/>       |
|                                       |                                | Fax:                       |
|                                       |                                | <input type="text"/>       |

