Form 2

Consent Form for Japanese Language Studies

Date: _____

Dear Mr. Ichiro MATSUOKA, Mayor of Higashikawa

I agree that the applicant goes abroad for Japanese studies and I take total responsibility for any problems while in the program. Additionally, I do not seek compensation for any loss or injury occurred in Higashikawa.

Guarantors signature:

(To be signed by guarantor)

]

[Relationship to the applicant:

Nationality: _____

Home Address: _____

Tel:

Full name of the Applicant: