[month] [day], [year]

Fiscal Year 2019 International Student Associations in Japan Network Promotion Project

**Application Form**

Japan Student Services Organization

Dr. Yoshioka Tomoya, President

Location

Name of the International Students Association

Position of the representative, etc.

Name of the representative: (seal or signature)

We apply as follows concerning the International Student Associations in Japan Network Promotion Project.

1. General information

|  |  |
| --- | --- |
| Name of the International Student Association |  |
| Name of representative |  | Name of deputy representative |  |
| Date of establishment |  |
| Number of members |  | persons | 1. International students currently studying in Japan ([\_] persons)
2. Alumni, etc., and other persons ([\_] persons)
 |
| Requirements for membership |  |
| URL of the official website\* Including SNS such as Facebook, etc. |  |

2. Outline and principles, etc., of the International Student Association

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|  |

3. Project Implementation Contact Person with the Japan Student Services Organization

|  |  |  |
| --- | --- | --- |
| Name | Title | Location, telephone number, fax, e-mail |
| (Implementation contact person)[\_] [\_] | [\_] [\_] |  |

4. Activities Implemented and Planned in Fiscal Year 2019

Describe efforts undertaken by the applying International Student Associations. Make a selection from the options stated in "3. Eligible activities" of the Guidelines, namely, (1) Activities to raise the name recognition and expand the operations of the International Student Association, (2) Activities for the promotion of academic research and international understanding, (3) Employment support activities, (4) Activities to promote study and advancement to higher education in Japan, (5) Activities for information exchange with former international students and their alumni associations, and enter the number in the column headed "Activities description number."

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | Date and time of event※Plans also will be included. | Activity description number | Name of event | Venue | Number of participants | Outline of activity |
| E.g. | [month] [day], [year] | (3) | [country name] job seeking seminar | [university name] | 200 persons | Job seeking seminars for students from [country name], with former members of Student Associations as instructors. |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |

\* If multiple activities are implemented, enter descriptions of all activities.

\* Add pages if the available space is not enough.

5. Efforts in Fiscal Year 2020 and beyond to contribute to the promotion of the International Student Associations network

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|  |

6. Concerning the service as the secretariat for the annual plenary meeting of International Student Associations in Japan

|  |  |
| --- | --- |
| Able / unable to serve as the secretariat for the annual plenary meeting\* Mark the applicable option by encircling ○ | Able / Unable |

\* For details refer to section 12 of the Guidelines.