

Yuzawa Japanese Class 2025 Application Form

Please fill in the area inside the bold lines. The columns with ✕ signs must be filled.

(The contents of this application will not be used for any purpose other than Yuzawa Japanese Class.)

Date 2025/ /

Japanese class you would like to visit Choice of Class	Please circle a class you would like to attend (Yuzawa Class ▪ Yuzawa Night Class ▪ Ogachi Class)		
Furigana			
Name ✕			
Date of Birth ✕	/ /		
Country of Origin ✕			
Date of Arrival in Japan ✕	/ /		
Address ✕	〒		
Phone Number ✕	Landline	— —	
	Cellphone	— —	
E-mail	@		
Emergency Contact ✕	Name		
	Address		
	Phone Number	— —	
	Relationship		
Child Care Request * Only Yuzawa Class	Y e s ▪ N o	(Furigana) Child's Name	Age

TO: The Board of Education Yuzawa,	
As a condition of my application for Yuzawa Japanese Class 2025, I solemnly swear to observe under mentioned conditions in the following issues:	
* I promise to contact the staff in charge beforehand, when I am absent from or leave the classes.	
* I promise to observe traffic rules and to prevent traffic accidents on my way to and from the classes.	
* I promise to study Japanese hard and not to cause trouble for others.	
2025/ /	Signature

湯沢市教育委員会	本人確認書類の写し
記 入 欄	□在留カード □その他()