



School Visit Application Form

1, Contact Information

Date of Application		Name of Teacher		Position	
Name of School			School Address		
Telephone			Email		

2, Details of your school group

Number of Students		Age range		Year	
Level of knowledge of Japan					
Is Japanese taught at your school?	Yes	No	(Please circle which.)		

3, Details of desired School visit

① Please tick which option you prefer:

1	Consulate Staff come to your school* (Maximum number : Approx. 30 students)	
2	Your school group comes to the Consulate's office (Maximum number : Approx. 20 students)	

*If you want us to visit your school, please provide us the AV equipment availability.

Screen + projector + Laptop Yes () / No () DVD player Yes () / No () Internet connection Yes () / No ()

② Please indicate your two most preferred dates:

1 st Date	Time:	2 nd Date	Time:
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③ Please tell us what kind of topics you would like us to cover. Also please inform us of any special requests.

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④ Workshop / Paro

Workshop (Please indicate your two most preferred workshops. e.g. 1st / 2nd)

Yukata & Happi dressing		Origami & Japanese traditional toys		Learn about Japanese Food	
Japanese Calligraphy		*Authentic Japanese Tea *Only available for visits at Consulate and Y9 and over only.			

Paro

Would you like Paro (therapeutic baby seal robot) to join your school visit?	Yes () / No ()
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4, How did you know about this school visit?

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Please return your completed form by email to pr@ac.mofa.go.jp at least three weeks in advance of the dates you have indicated above.