FAX TO IIA 22-7609

Application for the Consultation on Everyday Life

Date: (day) / (mth) / (year)

Name	Surname given name (Katakana) (Alphabet)	Nationality Mother Language
Address & Contact Details	TEL: Cell Phone: FAX: Cell Phone E-mail: E-mail (PC)	Interpreter Not needed • Needed ( )
Visa Status	☐Spouse ☐Eiju (permanent) ☐Teiju (long-term) ☐Study abroad ☐Others ( )	
Age Group	☐teenager ☐20s ☐30s ☐40s ☐50s ☐60s or older	
Time of Consultation You would like	your first choise: ( ) second choice: ( ) third choice: ( ) ①9:00-10:30am ②10:30am-noon ③1:00-2:30pm ④2:30-4:00pm ※Please specify the time if you would like any other time frame. (: ～ :) ※Please circle if you would like to have consultation in February or March. (Feb • Mar)	

※Please check the contents of consultation. Multiple answers OK.

☐Immigartion procedures ☐Labour • Insurance ☐Marriage • pregnancy • delivery ☐Divorce ☐Children

☐Interpretation • Translation ☐Culture • Exchange ☐Medical ☐Driver's License ☐Japanese

☐Others

Date/Place:

①Fri, 13 Jan 2012 (9:00am-4:00pm) Seminar Room A, Sangyo Sozo Kan, 6th floor of LATOV

②Tue, 21 Feb 2012 (10:00am-noon) Conference Room, Lifetime Education Plaza, Washington Hotel

③Tue, 6 Mar 2012 (1:00pm-4:00pm) Conference Room, Lifetime Education Plaza, Washington Hotel

※Please use one application form for each day of consultation.

※Please write the time you would like in the space provided above.

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