## PERSONAL RECORD

1	Nationality:	Fu	ull name:	
2	Date of birth:			
3	Address:			
4	Marital Status:	Single · Married (Nam	e of spouse:	)
5	Academic history: Name of School	Location	Date of entry	Graduation date
1	.)			
2	2)			
3	3)			
4	£)			
5	5)			
6	Record of Japanese stuc Name of school	ly: Location	Date of entry	Graduation date
1	.)			
2	2)			
7	Work experience: Name of employer	Location	From:	To:
1	.)			
2	2)			
93	3)			
4	£)	-		
5	5)		<u> </u>	
8	Record of entry into / c Date of entry	leparture from Japan Date of Departure	Visa status	Purpose
1	.)			
2	2)			
92	3)			
4				
5	5)			

9	Purpose of study				
	· · · · · · · · · · · · · · · · · · ·				
2)					
	Plans following graduation from the Enman Institute 1) Enter a school of higher grade				
					Name of school Department
	Find work in Japan				
	Place of Employment : Name				
	Address				
	Type of business				
	Start an enterprise				
	Address				
		Type of business			
	Proposed plans to raise money				
4)	Other:				
	T 0°				
	I affirm the above to be true and written by				
	Date :				
	signature of applicant :				

## WRITTEN OATH OF SUPPORT

To the minister of Justice, Japanese Government:

Applicant's Nationality : \_\_\_\_\_

Full Name : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ Sex : \_\_\_\_\_

I hereby agree to take responsibility for the above named applicant. My reasons for accepting this responsibility and how I intend to fulfill my financial commitments to the above mentioned applicant are as follows.

1. The reason of financial sponsorship (include the relationship between the applicant and disburser)

2. I \_\_\_\_\_\_as the sponsor of the above named applicant, take full financial responsibility for all expenses incurred by the above mentioned applicant, during his/her travel to Japan and during his/her stay in Japan. Furthermore, I agree to send a copy of my bank documents to prove myself financially sound and able to fulfill my commitments to the above mentioned applicant.

1) Tuition fees (1 Year):

¥

¥\_\_\_\_\_

2) Living fees (Monthly):

3) Method of Payment : (Please state the method in detail)

Date : \_\_\_\_\_\_
Disburser's Address : \_\_\_\_\_\_
Tel : \_\_\_\_\_\_
Full Name & Signature : \_\_\_\_\_\_
Relationship : \_\_\_\_\_\_