

*In the case of multiple applicants, please apply a priority ranking as much as possible

Date:

Recommendation Form

To the Director of the Okinawa Prefecture International Exchange Division:

The individual written below is understands the objective and meets the participation requirements, so I am sending this recommendation form along with the other required materials.

1. Name of Participation Applicant

2. Reason for Recommendation

Name of Kenjinkai

Name of Representative

(Signature)

(Person in charge at Kenjinkai)

Name:

Email:

TEL:

FAX:

*In the case that the documents are inadequate or liaison and coordination is required, please list someone we are able to get in contact with (with Japanese language ability). Please list even if the representative and the person in charge are the same.