

Application Form

(Visit to JICA overseas project sites)

Date : _____ , _____

Organization	
Representative	Name : _____ 【position/title : _____】
Contact Person	Name : _____ E-mail : _____ Address : _____ Tel : _____ Mobile : _____ Fax : _____
Contact Person for Emergency (in Japan)	Name : _____ E-mail : _____ Address : _____ Tel : _____ Mobile : _____ Fax : _____
Profile of Organization	※ Please make a check in the appropriate box. <input type="checkbox"/> Local Government <input type="checkbox"/> NGO/NPO <input type="checkbox"/> Educational Institution <input type="checkbox"/> Private Company <input type="checkbox"/> Others 【 _____ 】
Visiting Country and the Duration	Country : _____ Duration: From _____ () to _____ () _____ days ※ Please attach the detail tour schedule and questionnaire.
Number of Visitors	Total Number : _____ ※ Please attach the list of participants.
Purpose of the Visit	
Requests to JICA	※ Please make a check in the appropriate box and fill out the desired date and time. <input type="checkbox"/> JICA Office 1 st Desired Date&Time : _____ 2 nd Desired Date&Time : _____ Detail : _____ <input type="checkbox"/> JICA Project Site 1 st Desired Date&Time : _____ 2 nd Desired Date&Time : _____ Detail : _____ <input type="checkbox"/> Other (_____) 1 st Desired Date&Time : _____ 2 nd Desired Date&Time : _____ Detail : _____
Feedback Plan of the Visit	

※ Please arrange the accommodation, transportation, and interpreter by yourself.