（様式３ [Form 3]）

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Recommendation Form

Language Information

Time

Abroad

International Experience

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 志願者  Candidate | | | | [Furigana] Candidate’s Name  Date of Birth (YYYY/MM/DD) Sex ( ) | | | | | | | | | | | | | Nationality | |  | |
| Age | | Years Old  (As of Apr. 1st 2022) | |
| Address　〒(Postal Code) | | | | | | | | | | | | | | | | |
| Elementary School Name Reiwa YY MM (Expected Graduation Date) | | | | | | | | | | | | | | | | |
| Number of Absences | | | 4th Grade | | Days | | 5th Grade | | Days | | | 6th Grade | Days  (As of the end of Dec) | | Main reasons for absences | | | | | |
| 海  外  での  生育  歴 | Country | | | | State/Province | | | Time Period | | | | | | Educational Institution Name  (If never enrolled, leave blank) | | | | | | |
|  | | | |  | | | YYYY 年 MM 月 ～  YYYY 年 MM 月 ( Age) | | | | | |  | | | | | | |
|  | | | |  | | | YYYY 年 MM 月 ～  YYYY 年 MM 月 ( Age) | | | | | |  | | | | | | |
|  | | | |  | | | YYYY 年 MM 月 ～  YYYY 年 MM 月 ( Age) | | | | | |  | | | | | | |
|  | | | |  | | | YYYY 年 MM 月 ～  YYYY 年 MM 月 ( Age) | | | | | |  | | | | | | |
| 在留期間 | Total Time | | | | | Preschool Time | | | | Time at [Non-International / International School]  (Please circle the applicable item) | | | | | | Time at a Japanese School Abroad | | | | Time at a school with supplementary Japanese classes available |
| Year(s) Month(s) | | | | | Year(s) Month(s) | | | | Year(s) Month(s) | | | | | | Year(s) Month(s) | | | | Year(s) Month(s) |
| 言  語  状  況 | Japanese Language Ability | | | | | | | | | | Other Language Ability | | | | | | | | | |
| （ 　 　　　　　 ) Language | | | | | | | （ 　　 ）Language | | |
| １ Listening（ ）  ２ Speaking（ ）  ３ Reading（ ）  ４ Writing（ ） | | | | | | | | | | １ Listening（ ）  ２ Speaking（ ）  ３ Reading（ ）  ４ Writing（ ） | | | | | | | １ Listening（ ）  ２ Speaking（ ）  ３ Reading（ ）  ４ Writing（ ） | | |
| Please describe the candidate’s ability using the following pattern:  A (Highly proficient) B (Proficient) C (Low) D (No ability) | | | | | | | | | | | | | | | | | | | | |
| 推  薦  理  由 | | Reasons for Recommendation | | | | | | | | | | | | | | | | | | |
| I confirm that the above information is true and correct.  Reiwa YY MM DD  Elementary School Name    Principal’s Name Personal Seal | | | | | | | | | | | | | | | | | | | | |

・Once the principal has filled out the recommendation form and returned it to the candidate’s parent(s) or guardian(s), it is the parents’/guardians’ responsibility to submit the form to the Ashiya International Secondary School principal. Write the candidate’s name and school on the front of the envelope. Do not write in areas marked with ※

・Please only fill out the Language Information section if the candidate is non-Japanese or a returnee.