【個別相談対応者: 】

(Date)/(Month)/(Year)

Counseling Sheet for Returnee Student (Category 2)

	Name (katakana)			Date of Birth		Age	Nationa	lity	
						X As of Apr.1, 2026			
Applicant									
	Name of	Current							
	Elementar	y School							
Parents	(katakana)								
	Name								
Present Address					Phone	()		
					Fax	()		
If you live abroad	E-mail:	ible write the o	details of a c	ontact nerson	living in	Ianan			
If you live abroad, please if possible, write the details of a contact person living in Japan. Name (katakana) (Relationship) Phone ()									
Planned Arriva					/				
(If currently living abroad / outside Hyogo in Ja				Japan) ← please circle.			(Month) (Year)		
Planned address in Hyogo (if currently living abroad or outside Hyogo) Note: If you undecided, please indicate.									
, Нуодо									
If you currently live outside Hyogo Prefecture, please indicate where you plan to live.									
(A) I will purchas	•				Juli to live	•			
(C) I will live wi		(D) I will re		-	use.				
Country		pad(Period) Duration that the applicant attended							
	(month)/ (Year)∼		Japanese School Abroad			panese			
	(month	` ′	Japanese Sc.	hool Abroad	Supplementary School		School Abroad etc		
	Total:		Year(s)	Month(s)	Year(s) Month(s)	Year(s)	Month(s)	
Previous schools attended (Including Japanese one(s))									
		Period (Month / Year -Month / Year)							
Language			Language Ability						
Japanese		(1) Fluent (2) Advanced (3) Basic (4) None							
		(1) Fluent	(2) Advanced (3) Basic (4) None					
			1) Fluent	.,) None		
T . 1.		1) Truent	(2) Havanee	(3)	Busic (4)) Trone			
Language in which you want to take the Entrance Exam		Essay			Interview				
Any additional in	nformation								

Remarks

- (1) All year notations except date of birth should be written in Western calendar year.
- (2) In the "Any additional information" column, please enter any considerations for the examination.