(Format 8-A)

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| To the principal of former school of choice Application for the Change of the School of Choice (*Ko*) |
|  | Examinee No. | Name of the applicant |  |
|  ① Course: |  |
|  ② Number: |
| Change to |  (Prefectural/Municipal)  High/Upper Secondary School - Full-time Course name: 　　　　　　　　　　 |
|  | If you are not accepted into the school that you applied for, do you wish to enroll in your former school of choice? (Circle one) |  Yes No |  |
| I have submitted the application form to your school, however I would liketo change my school of choice, as above, and hereby ask for your permission. Cut hereDate: 　　 / / (MM/DD/YYYY)To: Principal of (Prefectural/Municipal) High/Upper Secondary School |
|  | Applicant | Address |  |  |
| Name |  |
| Guardian | Address |  |
| Name |  |
|  |
| I hereby admit that the above application is appropriate in light of the operating procedure for Academic Year Special Admission for Foreign Students.Date: 　　 / / (MM/DD/YYYY) (Prefectural/Municipal) Junior High SchoolPrincipal Seal |

\* Junior high schools are to prepare this format using A4-sized paper.

\* For applicants who live overseas during the period when application for the change is available, the certificate from the principal of the junior high school is not necessary. Even in that case, the sections of “Applicant” and “Guardian” must be filled out by the applicant and guardian themselves, respectively.

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| To the principal of new school of choice Application for the Change of the School of Choice (*Otsu*) |
|  | School of the applicant |  Graduated / Will graduate from (Prefectural/Municipal)  Junior High School  |  |
| Name of the applicant |  Sex　DOB: 　　 / / (MM/DD/YYYY) (　　) |
| Name, Course and Examinee No. of the former school of choice |  (Prefectural/Municipal)  High/Upper Secondary School - Full time Course: Number:  |
| I have submitted the application form as above, however I would like tochange my school of choice and hereby ask for your permission.  |
|  | Schedule: | Full-time | Course: |  |  |
|  | If you are not accepted into the school that you applied for, do you wish to enroll in your former school of choice? (Circle one) |  Yes No |  |
| Date: / / (MM/DD/YYYY)To: Principal of (Prefectural/Municipal)  High/Upper Secondary School |
|  | Applicant | Address |  |  |
| Name |  |
| Guardian | Address |  |
| Name |  |
|  |
| I hereby admit that the above application is appropriate in light of the operating procedure for Academic Year Special Admission for Foreign Students. Date: / / (MM/DD/YYYY) (Prefectural/Municipal) Junior High SchoolPrincipal Seal  |
| I hereby certify that I have received the above applicant’s Application for the Change of the School of Choice (*Ko*).Date: / / (MM/DD/YYYY) (Prefectural/Municipal) High/Upper Secondary SchoolPrincipal Seal |