No._____

Consultation Form for Foreigners Living in Tokyo (For students enrolled in April 2026)

Entry Date Y _ _ _ _ M _ _ D _ _

Applicant Name			Male Female
Date of Birth Y _ _ _ _ M _ _ D _ _ Your Age _ _ (As of March 31, 2026)		Nationality	First Language
Parents / Guardians Information	Father`s Name (Guardian's Name)		Does he live with you? Yes No
	Mother's Name (Guardian's Name)		Does she live with you? Yes No
Current Address	_____ _____ Tokyo _ _ _ - _ _ _ _, Japan		
Phone Number	TEL ( )-( )-( )		
Contact Information :Only fill this out if your parent / guardian is unable to speak Japanese.	Name		
	Relationship to you		
	Contact Details (e-mail or telephone#)		

Please tell us about your background.

❶ Have you ever enrolled in a Japanese elementary or junior high school? (Yes / No)

❷ If you have enrolled, what grade did you start attending?

Elementary1 E2 E3 E4 E5 E6 Junior High1 JH2 JH3

❸ Please tell us the name of the junior high school you expect to graduate from or you graduated from. If overseas, please also tell us the name of country.

( )

Please check all that apply regarding your Japanese language ability.

	Yes	No	Somewhat
Able to write in hiragana and katakana.			
Able to manage an everyday conversation.			
Able to understand school lessons.			

Please circle what identification you brought today.

Residence Card / Passport / Student Card / Graduation Certificate / etc.( )