Application form　Response and supporter training

Deadline: 14 Feb

Matsue Intl. Tourism Div. | **FAX:** 0852-55-5550 | **Email:** k.kouryu@city.matsue.lg.jp

　　　　　　　　　　＊Please use the title “bousai” when replying by email.

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| --- | --- | --- | --- |
| Name |  | Gender |  |
| Japanese Kana (if available) |  | Nationality |  |
| Language |  |
| Address |  |
| Tel. No. |  |
| Email |  |
| Languages\*Multiple languages not necessary\*circle the appropriate ability level | (Japanese)｛ Can speak | can speak a little | can’t speak ｝( )｛ Can speak | can speak a little | can’t speak ｝( )｛ Can speak | can speak a little | can’t speak ｝ |
| Please check (☑) the boxes you wish to apply for※Only one is necessary | □ **①Disaster response + ②Lunch & Exchange (9:30-13:00)**　　　→□ I need an interpreter　　　　 →□English　　　□Chinese　　□Korean　　□Tagalog　　　　　 　□Veitnamese　　　　□Other（　　　　　　　　）　　　　 　 ※If no interpreters are available we will use simple Japanese.　　　　□ I don’t need an interpreter□ **②Lunch & Exchange + ③Supporter training (12:00-15:00)**□ **③Supporter training (13:00-15:00)** |

※Personal information will only be used for this training class.

Questions: Matsue Intl. Tourism Div. (Mon~Fri, 8:30~17:00)

　　　　　　　　 　　86, Suetsugu, Matsue 〒690-854

　　　　　　　　　 　TEL: 0852-55-5175　FAX: 0852-55-5550

　　　　　　　　　 　Email: k.kouryu@city.matsue.lg.jp

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