

# APPLICATION FORM FOR T. MIKURIYA AWARD

in support of Alberta-Japan Student Exchanges

The personal information collected on this form is pursuant to the provisions 33(c) of the *Freedom of Information and Protection of Privacy Act, R.S.A. 2000, cF-25*. and will be used for the purposes of administering the T. Mikuriya Award in accordance with its terms of reference. This information will be used in accordance with the *Freedom of Information and Protection of Privacy Act*. Should you have any questions regarding this activity, please contact:

Director  
International Education Services, Alberta Education  
Main Floor, 44 Capital Boulevard  
10044 - 108 Street  
Edmonton, Alberta  
T5J 5E6  
(780) 427-2035

Student's Last Name	Student's First and Middle Names	
Grade	Birthday (D/M/Y)	
Home Address	Town/City	Postal Code
Home Phone No.	E-mail address	
Name of Father ( ) or Male Guardian ( )	Telephone	
Name of Mother ( ) or Female Guardian ( )	Telephone	
School	School Principal	
School Address	Town/City	Postal Code
School Telephone	School Fax	
School Jurisdiction	Superintendent	
Address (complete mailing address)	Postal Code	
Jurisdiction Telephone	Jurisdiction Fax	

## Exchange Program Background

Name of existing exchange program for which you have been accepted for study at a Japanese school:

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Program dates (include hosting in Alberta / studying in Japan)

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What do you wish to accomplish through this exchange? What are your main objectives for participating in the exchange?

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## Japanese Language and Culture

Please demonstrate your interest in Japanese language and culture. Outline any related courses you may have taken and any activities you may have been involved in. The latter may include personal hobbies, participation in clubs, previous exchanges or hosting experiences.

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## Principal's Recommendation

Please attach a letter of recommendation from your principal.

Notes: \_\_\_\_\_

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## Student's Signature

I hereby apply for the T. Mikuriya Award in Support of Alberta-Japan Student Exchanges. The information provided on this application is correct and complete. I am an Alberta resident and will be in high school during the course of the exchange.

I understand that should my application be successful, the award will be withdrawn and repayment will be made on a pro-rata basis if I do not fulfill my commitment to the exchange program and/or decide to return to Canada prior to completion of the term of study.

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Student's Signature

\_\_\_\_\_

Date

## Parents' Signature

I/we approve of my son's/daughter's application for the T. Mikuriya Award in Support of Alberta-Japan Student Exchanges. To the best of my/our knowledge, the information provided on this application form is correct and complete.

I/we understand that should the application be successful, the award will be withdrawn and repayment will be made on a pro-rata basis if the student does not fulfill his/her commitment to the exchange program and/or decides to return to Canada prior to completion of the term of study.

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Parent's/Guardian's Signature

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Date

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Parent's/Guardian's Signature

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Date