

Format 1

Application Form				
Applicant	Furigana	○○○○ ○○○○		
	Name	○○ ○○	○○○○ Year ○○ Month ○○ Day	
	Current Address	〒 ○○○-○○○○ 石川県 ○○市 ○○町 ○丁目 ○番地 (Postal Code) (Address)		
	Phone Number	○○○ - ○○○○ - ○○○○		
	Place of Work (If Employed)	Name of Workplace	○○株式会社 ○○工場	
		Office Address	○○○-○○○○ 石川県 ○○市 ○○町 ○丁目 ○番地 (Postal Code) (Address)	
		Office Phone Number	○○○ - ○○○○ - ○○○○	
	Past Educational Background	School Name	School Attendance Status (Enrollment, Graduation, Attendance etc.)	
		昭和○○年 ○○市立○○小学校 (Year) (Elementary School Name) 平成○○年 ○○市立○○中学校 (Year) (Junior High School Name)	卒業 (Example: Graduated) 卒業(2年生より不登校 欠席○日) (Example: Graduated (Did not attend during the eighth and the ninth years))	
	Current Educational Background	Are you currently a student? <input type="checkbox"/> No <input type="checkbox"/> Yes School Name () (Expected to graduate in March 2026)		
Parent / Guardian	Name	○○ ○○	Relationship ○	
	Current Address	〒 ○○○-○○○○ 石川県 ○○市 ○○町 ○丁目 ○番地 (Postal Code) (Address)		
	Phone Number	○○○ - ○○○○ - ○○○○		
I wish to apply for admission to your school. To the Principal of Ishikawa Prefectural Asunaro Junior High School ○○○○ Year ○ Month ○ Day				

(Notes)

Information regarding the above may be shared between Ishikawa Prefecture and the city or town where the applicant resides, or the school from which the applicant attended, in order to manage school records or perform administrative procedures. Personal information will not be provided to or used by third parties for any purposes other than those listed above.

To the Principal of Asunaro Junior High School

I agree with the contents of the “Application Guide for 2026 Ishikawa Prefectural Asunaro Junior High School” and the notes above, and wish to

If the applicant is under age of 18, please have a sign here.

Applicant Signature

○○ ○○

Parent/
Guardian
Signature

○○ ○○

