2024 J.S.A. SAKE DIPLOMA INTERNATIONAL Certification Exam Application Form				L	事務局確認欄		
Family Name				First Name			
漢字						Photo (4cm×3cm) *Portrait without hat taken within 3 months in color.	
Gen	der Male	☐ Female	Date of Birth (y	ear/month/day) /	/	Age	
J.S.A	A.Membership No. ((if any)	mber if case of re-ta	ke(免除受験)			
Mailing	Address and Postal Code (漢字での記載可)				Country		
Mailing Address					TEL +		
S	E-mail				FAX +		
Nationality					Exam Location: ple	ase check one	
Company Name					☐ Tokyo	☐ Osaka	
	I have read and und J.S.A. for the opera	derstood the outline of tion of the exam.	f the exam and a	gree that my p	personal information	will be kept by	
*signature:				*date:	yyyy/ mm	/ dd	
		2024 J.S.A. SA			TIONAL	Please fill in your name	
	Admit Card Photo					Name	
(4cm×3cm)							
ha	ortrait without at taken within months in color.	(J.S.A.check) **Valid with J.S.A. s	stamp				
	A IADAN C	one alien A siedi.					
JAPAI Somme Associa	JSA Bldg. 2F, 17-	nmelier Associatior 3, Kanda-higashimatsushit yo, Japan 101-0042					

Please attach a copy of your photo ID $\cdot\,\text{ID}$ must be issued by government office (ex. driver's license, passport) and have your photo. $\cdot\,\mbox{If}$ image is unclear, you may be asked to submit another one.