| FCCJ Student Membership Application 2024-2025 | | | |
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| Applicant Information | | | |
| Name: (underline surname) Gender (Circle one): M F | | | |
| Date of birth: | | Nationality: | |
| Current address: | | | |
|  | | Phone: | |
| E-mail address: | | | |
| academic Information | | | |
| Current school: | | | |
| Status (Undergrad or Grad): | | Major: | |
| School Address: | | | |
|  | | | Phone: |
| Expected Graduation date: | | | |
| Questionnaire | | | |
| Why do you want to become a member of FCCJ? | | | |
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| What kind of existing FCCJ programs interest you? | | | |
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| What kind of student programs would you be interested in seeing? | | | |
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|  | | | |
| How did you hear about the student membership program at FCCJ? | | | |
|  | | | |
| Signatures | | | |
| I certify that the above information is true and accurate. I agree to abide by the policies of the Foreign Correspondents Club of Japan. | | | |
| Print Name: | Date: | | |
| Signature: | | | |

PLEASE SEND TO THE ATTENTION OF NAOMICHI IWAMURA AT FCCJ WITH A PASSPORT SIZE PHOTO, COPY OF STUDENT IDENTIFICATION CARD AND RESUME TO:

The Foreign Correspondents’ Club of Japan, Marunouchi Nijubashi Bldg 5F, Marunouchi 3-2-3, Chiyoda-ku, Tokyo　 100-0005