| 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