

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 Branch, Alberta Education
2nd Floor, 44 Capital Boulevard
10044 - 108 St.
Edmonton, Alberta
T5J 5E6
(780) 427-2035

Student's Surname Given Names

Grade: Birthday (D/M/Y):

Home Address Town/City Postal Code

Home Phone No. E-mail address

Name of Father () or Male Guardian () Bus. Phone No.

Name of Mother () or Female Guardian () Bus. Phone No.

School Name Principal's Name

School Address Town/City Postal Code

School Phone No. School Fax No.

School Jurisdiction Name Superintendent's Name

Address (complete mailing address) Postal Code

Jurisdiction Phone No. Jurisdiction Fax No.

Principal's Recommendation

Please attach a letter of recommendation from your principal.

Notes: _____

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I understand that should my application be successful, the award will be withdrawn and repayment will be made on a pro-rata basis if I do not fulfill my commitment to the exchange program and/or decide to return to Canada prior to completion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

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I/we understand that should the application be successful, the award will be withdrawn and repayment will be made on a pro-rata basis if the student does not fulfill his/her commitment to the exchange program and/or decides to return to Canada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

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date