**2-WEEK ONLINE ENGLISH LANGUAGE SCHOOL - SUMMER 2025**

**APPLICATION FORM** 

**Course Dates: Monday 28th July – Friday 8th August 2025**

Please complete electronically and return to scholarship@jpn-scot.org
For information on Course Application and Scholarships, please contact: scholarship@jpn-scot.org

| **1. Personal Details** |  |
| --- | --- |
| **Surname / Family Name** | **Ishikawa** |
| **First Name** | **Koji** |
| **Date of Birth (DD/MM/YYYY)** | **30/04/2004** |
| **Gender** | **Male** |
| **Home Address** **(including city, post code and country)** | **6-1-1 Tamagawa gakuen, Machida, Tokyo, Japan****194-8610** |
| **Contact Telephone Number** | **+81-42-739-8290** |
| **Email Address** | **Ishikawa.k@gmail.com** |
| **Parent’s Email Address** | **Ishikawa.p@gmail.com** |
| **High School Name** | **Tamagawa High School** |
| **Agent (if applicable)** | **JSA** |
| **2. Accessibility**  |  |
| **P**lease tick any box applicable to you:

| **No disability** | **✓** | **Mental health difficulties** |  |
| --- | --- | --- | --- |
| **Blind / partially sighted** |  | **Unseen disability (e.g. diabetes, epilepsy, asthma)** |  |
| **Deaf / hearing impairment** |  | **Multiple disabilities** |  |
| **Wheelchair user / mobility difficulties** |  | **Other disability** |  |
| **Social / communication impairment** |  | **Dyslexia** |  |

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| **Please indicate any special arrangements or facilities you may require:** |
|  |
| **3. English Language Level (please tick which level is applicable to you)** |
| **Pre-intermediate** |  | **Intermediate** | ✓ | **Upper-intermediate** |  |
| Please complete and return this application form to scholarship@jpn-scot.org by the application deadline (**30th May 2025**). JSA will contact you with instructions on how to pay the programme fee.  Please be aware that if you withdraw from the programme after the cancellation deadline (**20th June 2025**) you may be liable to pay the programme fee in full. |

 Application deadline: Friday 30th May 2025