

Local Government Officials Training Program

Guidelines for the Application and Other Forms

1. Trainee Application Form (Attachment 1)

Type or print in Japanese or English. Each applicant must fill out the application by himself or herself.

① Applicant Name

Write your name as it is written officially in your passport. Then write your name again to clarify which are your given and family names.

② Nationality

Write the nationality shown in your passport.

③ Sex

Check one box.

④ Date / Place of Birth

Write your date of birth in the order of year / month / day. Write your place of birth as it appears on your birth certificate.

⑤ Dietary Restrictions

Please state if there are any things you cannot eat (including those due to medical or religious reasons).

⑥ Marital Status

Check one box.

⑦ Occupation

- Please write full contact details for your workplace, including a mailing address (municipality, district/region/state and country)
- Concerning your official position/title, please indicate your current title and your job type (e.g. clerical staff, engineer, researcher, curator, teacher, etc)
- In case CLAIR needs to contact you before your arrival in Japan, please include your direct telephone/mobile phone and fax numbers as well as your E-mail address.
- In the event you are unable to be contacted, please list a workplace contact person (preferably your supervisor) along with their name, job title/position, telephone and fax number.

⑧ Home Address

Please accurately type or print your current home address, telephone/fax number. In case of an emergency, please include contact details for two family members or friends in your home country.

※ Your host institution will be in touch with you as soon as your placement is decided. They will request a series of documents that are necessary to process your visa application. It is vital that we are able to get in touch with you at short notice, so please ensure that you provide full, accurate and up-to-date contact details.

⑨ Do you have a passport?

Check one box. If you already have a passport, include a copy of the personal information page. If you do not have a passport, you must apply for one immediately upon notification of acceptance as a trainee.

⑩ Have you ever been to Japan?

Check one box. If you have visited Japan before, include all details of your visit(s).

⑪ Educational Institutions Attended

Please fill out the section in chronological order.

⑫ Qualifications

If you have any language qualifications, be sure to include them.

⑬ Work Experience

Describe past work experience. Include the dates and positions held.

⑭ Overseas Training

Check one box. If you have had overseas training experience, fill in where you were posted, for how long, and details of the training you received.

⑮ Details of Desired Field of Training

- For section 1 provide a detailed and concrete explanation of your previous work experience in the field of study that you wish to pursue as a trainee.
- For section 2 firstly indicate the field of study that you wish to pursue as a trainee. For example: environmental management, sewerage treatment, tourism promotion etc. Then indicate details of the reasons for your desire to pursue this field of study.
- **Your explanation will be used by host institution to determine a suitable course of study for you during your stay. For this reason, try to be as detailed and specific about what you want to learn, what issues you wish to tackle in your home workplace and how the training will benefit your home local government.** Please use additional sheets of paper if the space provided is insufficient.

⑯ Experience in desired field of training

Please briefly summarize item (1) of section ⑮

⑰ Language Ability

Please check the most appropriate description of your English or Japanese language ability. This information is very important for determining your host institution.

※ **Please be honest about your level of language ability. In the past, some trainees have overestimated their abilities, and this has resulted in difficulties not only for their host institution, but also for the individual. Inflating your ability will make it more difficult for you to be placed in a suitable host institution and is to your disadvantage.**

⑱ Language Study

Please provide all the necessary details concerning the extent of your past language study in English, Japanese and any other language you have learnt.

※ These details will be used to help determine which Japanese class you take and which textbook you are provided with. Therefore, please give a clear, detailed statement regarding the extent of your previous language study.

⑲ Period Available for Training

Host institutions have the final say about the exact length of your stay in Japan as a trainee. However, they will of course take into consideration your individual circumstances. Please fill in either the period set by your host institution (if known), or the period that you are able to train for (between 6 to 12 months). Please note that the start date is non-negotiable.

2. Medical Checkup Sheet (Attachment 3)

In past years, some trainees' study programs have been disrupted because they failed to report past illnesses (13) and chronic illnesses (14) truthfully. Trainees are covered by basic overseas travel insurance, but will be personally responsible for costs if their medical checkup sheet is not accurate. Also, if between the date you submit your medical checkup sheet and the day before you arrive in Japan, there are any changes to your condition as stated in this document, you may also be personally responsible for medical costs. If this applies to you, please contact CLAIR immediately. We ask you all to take care of your health both before and after arriving in Japan.

Local Government Officials Training Program in Japan

Trainee Application Form

Photograph

(Taken Within the
Past 3 Months)

4cm long ×
3cm wide

① Applicant Name

- Please type or print your name in the standard alphabet format

John BROWN

Name as it appears officially in your passport

BROWN / John

Surname (family name) Given name(s)

② Nationality

Canadian

③ Sex

☒

Male

☐

Female

✓ Check the appropriate box.

④ Date / Place of Birth Date: 1982 Yr/ Jun Mon/ 11 Day Place: ○ ○ ○ ○ ○

⑤ Dietary Restrictions: Allergic to milk; cannot eat pork for religious reasons
(Including those relating to religious reasons)

⑥ Marital Status

☒

Married

☐

Single

✓ Check the appropriate box

⑦ Occupation (Please clearly type or print your employer's full contact details in English)

Workplace	Department Planning Division	Provincial / Municipal Government Name Newbridge City Council	
Work Address	ZIP CODE 111-111 1 Main Avenue, Newbridge Main Province, Canada		
Your Position/ Title	2 nd Secretary Legal Officer		
Work Telephone	01-2345-6789	Fax Number	01-111-2222
	(Mobile) 012-345-678	E-mail	abc@newbridge.gov.ca
Contact Person (Supervisor)	(Position/Title) Division Manager	Telephone	01-1122-3344
	(Name) Mary Supervisor	Fax Number	01-2222-3333

⑧ Home Address

Full home address, telephone number, and contact information in your home country in case of an emergency

Home Address	ZIP CODE 111-222 2 Suburban Street, Newbridge South Main Province, Canada		
Home Telephone	01-9876-5432	Fax number	01-9876-1234
		Your Personal E-mail	home@hotmail.com
Emergency Contacts (2 people)	Name Bob BROWN	Relation Father	Tel/Fax 01-5434-5434
	Name Mia TANAKA	Relation Friend	Tel/Fax 07-9876-6789

- ⑨ Do you have a passport? ☒ Yes ☐ No ☒ Check the appropriate box.

Passport Number	A1234567890	Date of Issue	April 1, 2004
Date of Expiration	March 31, 2014	Issuing Authority	Main Province Canada

- ⑩ Have you ever been to Japan? ☒ Yes ☐ No ☒ Check the appropriate box.
(If yes, please indicate when, where, and why)

I visited Japan on a personal trip from January 30 to February 6, 2001.
I traveled to Tokyo, Osaka, and Kyoto.

- ⑪ Educational Institutions Attended:

Name of Institution	Dates Attended	Specialization	Qualification Earned
ABC High School	Apr. 98' ~ March 01'	General Studies	Diploma
XYZ University	Apr. 01' ~ March 05'	Law	BA

- ⑫ Qualifications (please indicate if you have any special language qualifications)

Type of Qualification	Date Received
Japanese Proficiency Test, Level 3	August 1, 2011
TOEIC (Score: 830)	September 23, 2012

- ⑬ Work Experience

Dates	Employer	Position / Description of Work
April 2005 ~March 2007	Newbridge City, Mayor's Office International Relations Division	Planning for sister-city exchange projects
April 2007 ~March 2011	Newbridge City, Mayor's Office Secretarial Division	Secretary to the Mayor
April 2011 ~Present	Newbridge City, Mayor's Office Planning Division	Devised plan for City Centre revitalization
Month, Year ~Month, Year		
Month, Year ~Month, Year		

- ⑭ Have you received the overseas training before? ☒ Yes ☐ No ☒ Check the appropriate box.

Country/Hosting Organization	Training Period	Training Contents (please be specific)
Seoul City, Korea	Jan 10 2006 ~ Feb 1 2006	Studied the sister-city activities of Seoul City

⑮ Details of Desired Field of Training

(1) Please provide a detailed and specific description of your **work experience** focusing upon aspects relating to your desired field of training in Japan. (If the space provided is insufficient, please use additional sheets of paper.)

I became a local government official, because I believe that it will be government officials who lead my country into the twenty-first century.

As not only an employee of Newbridge City, but also a resident, I feel strongly about the city's future. I sought employment in Newbridge City because I want to make my community a better place to live for all residents. I want to make it the world's most pleasant city.

When I joined the city in April 2005, I was assigned to the International Relations Division of the Mayor's Office. At the International Relations Division, I was in charge of planning friendship and exchange projects, principally with cities with which we have a sister city relationship.

For four years beginning in April 2007, I was the Mayor's secretary. From April 2011 until the present, I have been worked in the Planning Division of the Mayor's Office, where I have been involved in work related to my desired field of training in Japan.

The Planning Division, which was newly established in April 2011, is the focal point for setting out a future vision for our city. Fifty people work in this division, which is comprised of three sections: the strategy section (conceptualization of the city's future), the planning section (preparation of concrete plans based on the strategy section's vision), and the implementation section (liaison with other departments to bring the plans to fruition). Presently, the division is working on ten projects, and I am in charge of the City Centre Revitalization Program.

The City Centre Revitalization Program outlines a plan to eliminate an old section at the heart of the city and replace it with a group of high rise buildings. This plan has already passed through the strategy section and planning section. My task is to coordinate the community consultation process, and liaise with other city departments and contractors who will actually implement the project.

In undertaking this assignment I have already faced numerous difficulties which have made my work in this vital position extremely challenging. As the project comes closer to becoming a reality, I have become increasingly determined to make the city where I live a better place. While feeling the weight of these responsibilities, I am honored to be able to contribute to determining the future direction of my city.

(2) Desired Field of Training : City Planning

Please indicate your desired field of training as well as detailed, specific reasons for your application.
(If the space provided is insufficient, please use additional sheets of paper.)

- (i) Focusing upon your desired field of training, please outline the current situation and pressing issues that must be addressed in your local government area.

I work at Newbridge City Council where we are at an important crossroads in deciding the city's future. We plan to carry out a wide-ranging revitalization programs across the entire city and are in the process of collecting public comments about the process. We foresee that rezoning and land purchases may be a divisive issue in the community. Further issues include formulating a strategy to attract businesses to the planned high-rise district and the formulation of regulations covering the revitalized areas.

- (ii) Please indicate specific details of what you would like to learn while in Japan. Please include details of institutions you would like to visit, events you would like to attend, technologies you would like to study, etc)

I am aware that a large number of Japanese local governments are in the process of reevaluating their urban design strategies. I am interested to learn about the planning process, the details of the plans themselves, and how problems are tackled by Japanese local governments.

I also understand that this reevaluation process involves not only urban design issues, but also encompasses financial reforms. In order to improve the efficiency of Newbridge City, I would like to look into the debate surrounding Japanese local government finance reform.

Lastly, I would be interested to study the professional development courses offered to public servants.

- (iii) Please indicate how you will apply what you learn while in Japan to your work upon returning to your own country.

Through studying the urban design strategy of a Japanese local government, I believe that I will be able to make a greater contribution to the planned changes facing Newbridge City in my role as leader of the City Centre Revitalization Program. I also hope that learning more about financial reforms and staff development will allow me to implement policies in Newbridge that will benefit the city's efficiency standards.

①⑥ Experience in Desired Field of Training (Please summarize item (1) of section ①⑤)

Years of Experience	Details of Experience
April, 2011 ～ Present	Planning Section, Mayor's Office, Newbridge City Leader of the City Centre Revitalization Program
Month, Year ～ Month, Year	(No need to list other work experience as it does not relate to City Planning)

①⑦ Language Ability ☒ Check the most appropriate response

	Japanese	English
Listening	<input type="checkbox"/> None <input type="checkbox"/> Greetings <input type="checkbox"/> Daily Conversation <input checked="" type="checkbox"/> Can understand Japanese radio or TV <input type="checkbox"/> Almost complete understanding	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Basic daily conversation <input type="checkbox"/> General topics (simple explanation) <input checked="" type="checkbox"/> Speech, debate and broadcasting
Speaking	<input type="checkbox"/> None <input type="checkbox"/> Greetings <input checked="" type="checkbox"/> Daily Conversation <input type="checkbox"/> Expressing your opinion about general topics in Japanese <input type="checkbox"/> No trouble communicating in Japanese	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Basic daily Conversation <input type="checkbox"/> Basic explanation, report and translation <input checked="" type="checkbox"/> Expression your opinion without difficulty
Reading	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input type="checkbox"/> Some Chinese characters (____letters) <input checked="" type="checkbox"/> A little understanding of newspapers <input type="checkbox"/> Almost complete understanding of Newspapers	<input type="checkbox"/> None <input type="checkbox"/> Basic sentences with dictionary <input type="checkbox"/> Basic sentences such as letters <input type="checkbox"/> General sentences used in newspaper <input checked="" type="checkbox"/> Advanced sentences used in newspaper
Writing	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input checked="" type="checkbox"/> Some Chinese characters (300letters) <input type="checkbox"/> Simple sentences <input type="checkbox"/> Able to express your opinion completely	<input type="checkbox"/> None <input type="checkbox"/> Basic sentences with dictionary <input type="checkbox"/> Basic sentences such as letters <input type="checkbox"/> Basic sentences in General topics <input checked="" type="checkbox"/> Making summary and describing your opinion

⑱ Language Training (Please type or print in detail)

Language	Period/Frequency of Study	Method/Content of Study	Institution	Qualification Earned
Japanese	At university ~ Present 1 hour every day	During my university years, one of my hobbies was studying Japanese. In particular, I would watch NHK satellite broadcasts from Japan or read Japanese literature in my spare time. I have passed the 2 nd level of the Japanese Language Proficiency Test. In addition, I understand daily conversations and can respond with little difficulty.	Self Study	2 nd level of the Japanese Language Proficiency
English	2005 ~ Present 2 hours Twice a week	(Not necessary if you are from an English-language speaking country) Following my assignment to the International Relations Division in the Mayor's Office, I realized the necessity of learning English for work purposes and have since studied diligently. I have received a score of 830 on the TOEIC English test. In addition, I understand daily conversations and have no difficulties with work-related matters.	Language school	Score of 830 on the TOEIC English test
Languages other than your mother tongue	At university 2 hours per week	Studied French for 4 years in college as a second language. Can converse on daily conversational level.	University	

⑲ Period Available for Training 18/ May/ 2014 ~ / /
Day Month Year

*Training is provided for between 6 months to 12 months. The exact length of your stay in Japan will be decided by your host institution upon consideration of your individual circumstances.

I hereby apply for the position of "Trainee" with the attached Written Pledge and Medical Checkup. I pledge that the above stated information is true and factual.

1 Day Jan Month 2014 Year

Signature of Applicant John BROWN

(To be filled out by applicant's supervisor)

I hereby certify that the above application form and Medical Checkup sheet are true, and approve of and recommend the applicant as a suitable cooperation and exchange trainee.

2 Day Jan Month 2014 Year

Organization Name Newbridge City Planning Division

Address 1 Main Avenue, Newbridge, Main Province, Canada

Tel 01 - 2222 - 3333 Fax 01 - 2222 - 4444

Name of Department Head Maria Lam

Signature of Department Head Maria Lam

Written Pledge

(Attachment 2)

If I am selected as a trainee on the Local Government Officials Training Program in Japan, I hereby pledge that:

2. I will observe Japanese laws.
3. I will observe the instructions of the Ministry of Internal Affairs and Communications (MIC), the Council of Local Authorities for International Relations (CLAIR), and my host institutions in Japan.
4. I will not list any false information in documents submitted to MIC, CLAIR, and the host institutions in Japan.
4. I will faithfully carry out the training as instructed, and abide by the rules and regulations of the host institution.
5. I will not participate in or any political activities or perform similar acts.
6. I will not receive any remuneration for work.
7. I will personally bear any expenses incurred in excess of the amount of allowances provided to me by the host institution and will not request an increase in allowances paid to me by the host institution. Also, if I discontinue my training before the designated period is completed and return to my home country without a compelling reason, I will personally bear all expenses incurred during the training.
8. I will personally repay all debts incurred during my stay in Japan.
9. I will not raise objections should MIC, CLAIR, or the host institution decide to discontinue my tenure as a trainee, either because they deem me unfit to continue, or due to unforeseen circumstances that make it difficult to continue the program.
10. After returning to my home country, I will apply the knowledge and technical skills acquired during the training to my work in my home country in order to contribute to its prosperity, as well as to promote friendly ties between my country, local government, Japan and Japanese host institution.

Name of Applicant: John BROWN
1 Day Jan Month 2014 Year

Signature: John BROWN

Medical Checkup Sheet

Name John BROWN

Date of Birth 1982 / June / 11
Year month date

Sex Male Female (Please circle one)

Current Address 1 Main Avenue, Newbridge, Main Province, Canada

1. Weight 70Kg 10. Hearing Normal

2. Height 185cm 11. Blood Sedimentation

3. Abdominal Palpation/
 Stethoscope Test None

4. X-Ray Normal Positive Negative

5. Chest Problem 13. Past Illnesses

None None

6. Eyesight With glasses 14. Chronic Illnesses

Left Right None
 Without glasses

Left 1.0 Right 1.0 15. Allergies Milk, pollen
 7. Color Blindness 16. Dietary restrictions

None Cannot eat pork

8. Blood Pressure 17. Blood type
120 /80 O positive

9. Urine Test Normal 18. Other

None

19. Alcohol ☐ Don't Drink ☒ Drink (Amount: 350ml per day/week/month)

20. Smoke ☐ Yes ☒ No (Amount: per day/week/month)

I hereby certify that the above details are correct.

Hospital Newbridge General Hospital

Address 100 Average Avenue, Newbridge, Main Province, Canada

Date 2014 / January / 1
Year month date

Certified by Dr. Sarah Smith

Signature Dr. Sarah Smith