

ด่วนที่สุด

ที่ มท ๐๘๑๐.๒/ ๑ ๓๓



กรมส่งเสริมการปกครองท้องถิ่น

ถนนนครราชสีมา เขตดุสิต กทม. ๑๐๓๐๐

๑๐ มกราคม ๒๕๖๐

เรื่อง โครงการฝึกอบรมข้าราชการขององค์กรปกครองส่วนท้องถิ่นในประเทศญี่ปุ่น ประจำปี ๒๕๖๐

เรียน ผู้ว่าราชการจังหวัด ทุกจังหวัด

สิ่งที่ส่งมาด้วย ใบสมัครและเอกสารประกอบการสมัคร

จำนวน ๑ ชุด

ด้วยสภาองค์กรปกครองส่วนท้องถิ่นเพื่อความสัมพันธ์ระหว่างประเทศแห่งประเทศไทย (CLAIR) ประจำปีประเทศสิงคโปร์ แจ้งว่า จะดำเนินโครงการฝึกอบรมข้าราชการขององค์กรปกครองส่วนท้องถิ่นในประเทศญี่ปุ่น ประจำปี ๒๕๖๐ (2017 Local Government Officials Training Program in Japan: LGOTP) ในการนี้ CLAIR ได้ขอความร่วมมือกรมส่งเสริมการปกครองท้องถิ่นคัดเลือกข้าราชการ/พนักงานส่วนท้องถิ่น เข้าร่วมการฝึกอบรมภายใต้โครงการดังกล่าว

กรมส่งเสริมการปกครองท้องถิ่น จึงขอความร่วมมือจังหวัดประชาสัมพันธ์ให้องค์กรปกครองส่วนท้องถิ่นในพื้นที่ทราบ หากมีความประสงค์สมัครเข้าร่วมโครงการฯ ให้จัดทำใบสมัครและเอกสารประกอบการสมัคร ส่งถึง “ผู้อำนวยการส่วนวิชาการและวิจัยเพื่อการพัฒนาท้องถิ่น กรมส่งเสริมการปกครองท้องถิ่น ถนนนครราชสีมา เขตดุสิต กรุงเทพฯ ๑๐๓๐๐” ภายในวันพุธที่ ๑๘ มกราคม ๒๕๖๐ ทั้งนี้ ผู้สมัครต้องแสดงหลักฐานความสามารถภาษาอังกฤษอย่างใดอย่างหนึ่ง ได้แก่ ผลสอบ TOEFL, IELTS, TOEIC, ผลสอบจากสถาบันภาษาของสถาบันอุดมศึกษา (CU-TEP, TU-GET, ฯลฯ) หรือผลสอบจากสถาบันการต่างประเทศ เทเวศน์วงศัโรปการ โดยผลสอบต้องไม่ต่ำกว่าร้อยละ ๕๐ ของคะแนนสูงสุด และทำการทดสอบมาแล้วไม่เกินกว่า ๒ ปี นับถึงวันปิดรับสมัคร (๑๘ มกราคม ๒๕๖๐) รายละเอียดปรากฏตามสิ่งที่ส่งมาด้วย

จึงเรียนมาเพื่อโปรดพิจารณาดำเนินการต่อไป

ขอแสดงความนับถือ

(นายธนา ยันตรโกวิท)

รองอธิบดี ปฏิบัติราชการแทน
อธิบดีกรมส่งเสริมการปกครองท้องถิ่น

กองพัฒนาและส่งเสริมการบริหารงานท้องถิ่น

ส่วนวิชาการและวิจัยเพื่อการพัฒนาท้องถิ่น

โทร. ๐ ๒๒๔๑ ๙๐๐๐ ต่อ ๒๒๑๒

โทรสาร ๐ ๒๒๔๓ ๑๘๑๒

2017 Local Government Officials Training Program in Japan Trainee Invitation Guidelines

The Local Government Officials Training Program (LGOTP) invites foreign provincial/state, municipal and other local government officials to come to Japan as trainees. Successful applicants are assigned to prefectures, designated cities, or other municipalities (hereinafter referred to as local governments) for a fixed period. The objectives of the program are to provide trainees with the know-how and technical skills of Japanese local governments, to contribute to the development of the trainees' local governments, to promote the internationalization of the host institutions, and to increase mutual understanding between the hosts and participants.

Each participating Japanese local government takes the lead in organizing the training program, along with the support of the Ministry of Internal Affairs and Communications (MIC), and the Council of Local Authorities for International Relations (CLAIR).

1 Program Overview

Since being established in 1996, the LGOTP has welcomed 1,115 trainees from 38 nations and region. After returning home, past trainees have utilized the valuable experiences gained while studying in Japan and have continued to play an active role in promoting friendly relations with their host institutions.

2 Length of Training

The training program runs for approximately 6 to 12 months, starting on Sunday, 21 May, 2017. The length of training varies depending on the host institution.

3 Training Program Overview

(I) Group Training

① Tokyo Orientation (May 22nd – 23rd) : Tokyo

An orientation to Japan, lectures on the Japanese local government system, and meeting representatives from host governments

② JIAM Training (May 25th – June 22nd) : Shiga Prefecture

Focuses on building Japanese language skills, learning about Japanese culture, and providing a deeper understanding of Japanese local government administration. Training is held at JIAM (Japan Intercultural Academy of Municipalities) in Shiga Prefecture.

③ JIAM Step-up Training (June 22nd – July 6th) : Shiga Prefecture

Extra two weeks of intensive Japanese language training (based on requests from host institutions)

(II) Specialized Training

Practical training is provided to each trainee in a specific field. This is held at the host institution.

4 Program Details

Upon arrival in Japan, trainees will spend approximately one month in Group Training. Group Training focuses primarily on Japanese language studies, but also includes studies of local government administration and other topics.

Following the completion of Group Training, trainees will move to their assigned local government to receive Specialized Training which is organized by each host institution. Specialized Training is the core component of the LGOTP. The content and length of the training program will vary depending on the trainee's host institution and will be decided by the host institution with considerations given to the wishes of the trainee.

5 Eligibility Criteria

Candidates for the LGOTP must:

- (1) Be an official of a province/state, municipality or other local government body.
- (2) Be able to converse in Japanese or English. In particular, Japanese is extremely important as the trainee will be residing in Japan for an extended period of time. Those with language skills will be given precedence if the number of applicants is greater than that of training positions being offered at the host institution.
- (3) Be eager and committed to studying at a local government in Japan. Also, after returning home, trainees must actively apply the knowledge attained during training to their own local government and work towards furthering the friendship between both countries and local governments.
- (4) Be willing to cooperate with the host institution and follow the host institution's instructions. Applicants must also fully acknowledge that conditions during their Specialized Training may differ from those of other trainees. Depending on the host institution, there may be differences regarding the length and content of the training program, working conditions, living environments, etc.
- (5) Be able to obtain the recommendation of the applicant's department head and receive approval to spend 6 to 12 months training in Japan.
- (6) In principle, be between 20 and 39 years of age upon arrival in Japan.

(However, this does not apply if an agreement has been reached between the dispatching and hosting institutions, or under other special circumstances.)

- (7) Have completed secondary education (high school education) in the applicant's home country.
- (8) Be a reliable individual who is physically and mentally healthy. (Because the program runs for an extended period, it is possible that this may pose risks to pregnant women. Therefore pregnancy is regarded as a disqualifying condition for participation in this program.)
- (9) Not have any past legal problems that would prevent the applicant from entering Japan.
- (10) Have never previously participated in the program.

6 Terms and Conditions

(1) Selection and Placement of Trainees

The capacity of local governments to receive trainees is limited and the placement of applicants cannot be realized unless the conditions of both applicants and host institutions can be successfully matched. For this reason, the acceptance and placement of trainees is decided by host institutions, CLAIR, and MIC through discussions based on candidate applications.

(2) Working conditions during Specialized Training

As previously stated in the "Eligibility Criteria" section, conditions for each trainee will differ depending on the host institution.

In general, the hours of training will be the same as the normal working hours of the host institution. Saturdays, Sundays, and Japanese national holidays will generally be non-working days. However, the trainee should follow the instructions set out by the host institution in regards to holidays. In some cases, depending on circumstances surrounding the training program, it may be necessary to schedule training activities on Saturdays, Sundays, or Japanese holidays.

Appropriate housing will be arranged by the host institution.

(3) Expenses and Discontinuation of Training

Host institutions will cover training costs, including round-trip international airfare, living expenses, training fees, and transportation expenses within Japan. However, if a trainee discontinues training before the end of the training period to return to the trainee's home country without a compelling reason, all the training costs shall, in principle, be paid by the trainee or by the organization in the trainee's home country which recommended the trainee for the LGOTP.

Trainees will generally not be permitted to leave Japan for temporary visits during the period of training unless there is a compelling reason. In the rare case

that a temporary trip abroad is approved, the costs shall be borne by the trainee (unless the trip is deemed a part of their training).

(4) Overseas Travel Expenses

The host institution will provide the trainee with a round-trip ticket between a designated international airport in the trainee's country and an international airport in Japan. The trainee shall bear the cost of transportation to the designated international airport in the trainee's home country. However, expenses related to the use of the designated international airport, expenses incurred at in-transit stops (such as overnight accommodation fees), and the cost of traveling in Japan between the international airport and the trainee's assigned host institution shall be borne by the host institution.

As Tokyo Orientation will be held immediately after arrival in Japan, all trainees must arrive at Narita International Airport.

7 Application Procedure

- (1) In the case where applications are made directly to CLAIR, each applicant shall submit the *LGOTP Trainee Application Form* (Attachment 1), the *Written Pledge* (Attachment 2), and the *Medical Checkup Sheet* (Attachment 3) by no later than Friday, 20 January, 2017 (in the case of Brazil, Friday, 17 February) to their employer, who shall then pass these documents on to the respective overseas office of CLAIR (in the case of Brazil, to the Confederação Nacional dos Municípios) which is responsible for handling matters concerning the trainee's home country. (For contact details, please refer to the List of CLAIR Overseas Offices.)
 - (2) However, in cases where applicants are applying to the program through a mutual agreement which is based on special relations (i.e. sister city relations) that already exist between their place of employment and a Japanese local government, applications shall be submitted to the related Japanese local government by no later than Friday, 20 January, 2017.
- * Any personal data contained in the application form shall only be used for matters relating to this program.

8 Preparing to Come to Japan after Selection

- (1) Host institutions will send a *Notification of Acceptance* to successful applicants' employers who shall then pass it on to the trainees.
- (2) Trainees whose acceptance has been confirmed shall submit the following documents in preparation for entering Japan as per the instructions of the host institution:

- ① Photographs (4 photos of 4cm height × 3cm width taken within the past 3 months)
- ② Post-training return-to-job guarantee form (original and duplicate, 1 copy each)
- ③ Personal identification (one copy)
- ④ Passport (one copy)

Trainees without a passport are asked to apply for one immediately upon acceptance to the program and must submit a copy as soon as it is issued.

- (3) After a trainee has been selected, the dispatching organization shall ensure that the trainee has the time and opportunity to study Japanese, and the trainee shall take it upon him or herself to do so prior to arriving in Japan.

Even for trainees who will undergo training in English (or their mother tongue), a basic level of conversational Japanese is necessary, as English (or their mother tongue) is generally not used in daily life in Japan. Trainees should attain a basic level of the Japanese language prior to arrival in Japan.

- (4) Should a pregnancy be discovered after acceptance to the program, notify your host institution or CLAIR immediately.

Important Notice

- (1) Japanese government regulations state that dependents of trainees participating in this program may NOT qualify for a dependent visa.
- (2) Please bear in mind when applying for this program that JIAM does NOT have the facility or staff required for meal preparation and other services during Ramadan.

List of CLAIR Overseas Offices

○ New York Office

Japan Local Government Center (CLAIR, New York)

3 Park Avenue, 20th Floor

New York, NY 10016-5902, U.S.A.

TEL 1-212-246-5542 FAX 1-212-246-5617

E-mail: jlgc@jlgc.org

○ London Office

Japan Local Government Centre (CLAIR, London)

15 Whitehall, London SW1A 2DD, U.K.

TEL 44-20-7839-8500 FAX 44-20-7839-8191

E-mail: mailbox@jlgc.org.uk

○ Paris Office

Centre Japonais des Collectivités Locales (CLAIR, Paris)

3, rue Scribe 75009 Paris FRANCE

TEL 33-1-40-20-09-74 FAX 33-1-40-20-02-12

E-mail: contact@clairparis.org

○ Singapore Office

The Japan Council of Local Authorities for International Relations, Singapore
(CLAIR, Singapore)

6 Battery Road, #26-01/02 Singapore 049909

TEL 65-6224-7927 FAX 65-6224-8376

E-mail: info@clair.org.sg

○ Seoul Office

CLAIR, Seoul

17th Floor Kyobo Bldg. 1, 1-ga, Jongno, Jongno-gu Seoul, 110-714, Korea

TEL 82-2-733-5681 FAX 82-2-732-8873

E-mail: info@clair.or.kr

○ Sydney Office

Japan Local Government Center (CLAIR, Sydney)

Level 12 Challis House, 4 Martin Place Sydney, NSW 2000 Australia

TEL 61-2-9241-5033 FAX 61-2-9241-5014

E-mail: mailbox@jlgc.org.au

○ Beijing Office

CLAIR, Beijing

Chang Fu Gong Office Bldg. 5F Jia-26 Jian Guo Men Wai St.

Chao Yang District Beijing, China P.O. Code : 100022

TEL 86-10-6513-8790 FAX 86-10-6513-8795

Email: clairbj-jp@clair.org.cn

※The recruitment and application process for trainees from Brazil is handled with the kind cooperation of the Confederação Nacional dos Municípios.

○ Confederação Nacional dos Municípios (CNM)

CNM INTERNACIONAL

SCRS 505, Bloco C Lote 01 - 3º andar

CEP: 70.350-530 - Brasília/DF Brasil

Local Government Officials Training Program in Japan

Trainee Application Form

Photograph (Taken Within the Past 3 Months) 4cm high × 3cm wide

① Applicant Name

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

 Please clarify the order of your name as it appears officially in your passport.

 Surname (Family Name)

 Given Name(s)

② Nationality

③ Sex

☐

Male

☐

Female

✓ Check the appropriate box.

④ Date / Place of Birth

Date: ____ Yr/ ____ Mon/ ____ Day Place: _____

⑤ Dietary Restrictions:

(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	Provincial / Municipal Government Name	
Work Address	Postal Code		
Your Position/ Title			
Work Telephone	(Mobile)	Fax Number	
		E-mail	
Contact Person (Supervisor)	(Position/Title) (Name)	Telephone	
		Fax Number	

⑧ Home Address

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

Home Address	Postal Code		
Home Telephone		Fax number	
		Your Personal E-mail	
Emergency Contacts (2 people)	Name	Relation	Tel/Fax
	Name	Relation	Tel/Fax

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

Passport Number		Date of Issue	
Date of Expiration		Issuing Authority	

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

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- ⑪ Educational Institutions Attended:

Name of Institution	Period Attended	Specialization	Qualification(s) Earned
	~		
	~		
	~		

- ⑫ Qualifications (Please indicate if you have any special language qualifications, etc)

Type of Qualification	Date Received

- ⑬ Work Experience

Period	Employer	Position / Description of Work
~		
~		
~		
~		
~		

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

Country/Host Organization	Training Period	Contents of Training (Please be specific)
	~	
	~	

⑮ Details of Desired Field of Training

- (1) 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.)

Desired field of training _____

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

- (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.

- (iii) Please indicate how you would apply what you have learned in Japan to your work upon returning to your home country.

(2) Please provide a detailed description of your work experiences focusing on aspects relating to your desired field of training in Japan.

(If the space provided is insufficient, please use additional sheets of paper.)

⑫ Experience in Desired Field of Training (Please summarize item (2) of section ⑪)

Period	Details of Experience
~	
~	

⑬ Language Ability ☒ Check the most appropriate response

	Japanese	English
Listening	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily Conversations <input type="checkbox"/> Can understand Japanese radio or TV <input type="checkbox"/> No trouble understanding native speakers	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily conversations <input type="checkbox"/> Others' opinions about general topics <input type="checkbox"/> News, speeches, debates
Speaking	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily Conversations <input type="checkbox"/> Expressing opinions about general topics <input type="checkbox"/> No trouble communicating at all	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily conversations <input type="checkbox"/> Expressing opinions about general topics <input type="checkbox"/> No trouble communicating at all
Reading	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input type="checkbox"/> Some Chinese characters (characters) <input type="checkbox"/> Simple newspaper articles <input type="checkbox"/> Advanced newspaper articles	<input type="checkbox"/> None <input type="checkbox"/> Simple sentences with dictionary <input type="checkbox"/> Letters, etc without dictionary <input type="checkbox"/> Simple newspaper articles <input type="checkbox"/> Advanced newspaper articles
Writing	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input type="checkbox"/> Some Chinese characters (characters) <input type="checkbox"/> Short paragraphs on general topics <input type="checkbox"/> Summaries and expressing opinions	<input type="checkbox"/> None <input type="checkbox"/> Simple sentences with dictionary <input type="checkbox"/> Letters, etc without dictionary <input type="checkbox"/> Short paragraphs on general topics <input type="checkbox"/> Summaries and expressing opinions

⑭ Language Learning (Please type or print in detail)

Language	Period/Frequency of Study	Method/Content of Study	Institution	Qualification(s) Earned
Japanese				
English				
Languages other than your mother tongue				

⑲ Period Available for Training 21 May 2017 ~ / /
Day Month Year

* Training is between 6 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 Sheet. I pledge that the above stated information is true and factual.

Day Month Year

Signature of Applicant _____

(To be filled out by the applicant's department head)

I hereby certify that the above Application Form and the attached Medical Checkup Sheet are accurate. I also believe the applicant to be a suitable candidate for this training program, and recommend the applicant wholeheartedly.

Day Month Year

Name of Organization

Address

Tel

Fax

Name of Department Head

Signature of Department Head

Written Pledge

(Attachment 2)

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

1. I will observe Japanese laws.
2. 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 institution in Japan.
3. I will not list any false information in documents submitted to MIC, CLAIR, and the host institution 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 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, and to promote friendly ties between my country and Japan, as well as my local government and the Japanese host institution.

Name of Applicant: _____

_____ Day _____ Month _____ Year

Signature: _____

Medical Checkup Sheet

Name _____

Date of Birth _____
Day / Month / Year

Sex Male Female (Please circle one)

Current Address _____

1. Weight _____

10. Hearing _____

2. Height _____

11. Blood Sedimentation

3. Abdominal Palpation/
Stethoscope Test

12. Tuberculin Reaction

4. X-Ray _____

Positive Negative

5. Chest Problems

13. Past Illnesses

6. Eyesight
With glasses

14. Chronic Illnesses

Left _____ Right _____
Without glasses

15. Allergies _____

Left _____ Right _____
7. Color Blindness

16. Dietary restrictions

8. Blood Pressure

17. Blood type

9. Urine Test _____

18. Other

19. Alcohol ☐ Yes ☐ No (Amount: _____ per day/week/month)

20. Cigarette ☐ Yes ☐ No (Amount: _____ per day/week/month)

I hereby certify that the above details are correct.

Hospital _____

Address _____

Date _____
Day / Month / Year

Certified by _____

Signature _____

Personal Data Protection Act (PDPA) Consent Form (LGOTP)

Collection and Use of Personal Data

We hereby inform you that:

- a) When you take part in our programs and activities, we ask you to submit to us your personal data for the purposes stated below.
- b) We will use your personal data only in the circumstances stated below. Unless otherwise required by the laws and regulations, CLAIR Singapore will not disclose your personal data to ~~third parties~~.
- c) Your personal data will be removed as soon as it is reasonable to assume that it will no longer be required in the program or activity you participated.

CLAIR Singapore
Personal Data Protection Officer
Deputy Executive Director Takashi Nabeoka

Notices

1. Purposes for the Collection of Your Personal Data

For the confirmation of your identity for this program, CLAIR Headquarters and the hosting local government requires your name, passport number, nationality, date of birth, date of issue and expiry of your passport, work history and medical examination report.

We require your mobile phone number in case we need to contact you when you are travelling or in the event of emergency situations.

In addition, we take photographs during the program as photographic record and sometimes post pictures of an event in an article of our mail magazine and website.

2. Use of Your Personal Data

The personal data which you submit to us will be disclosed to CLAIR Headquarters and your hosting local government.

During the program, we will contact you on your mobile phone number when necessary.

During the program, we take photographs as photographic record and sometimes post pictures of an event in an article of our mail magazine , website, and brochures.

Please complete and sign in the right column	I have read and agreed to the above.
	(D) /(M) /(Y)
	<u>Professional affiliation:</u> _____
	<u>Name:</u> _____
	<u>Signature:</u> _____

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 him 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 your 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 list any foods you cannot eat (including those due to medical or religious reasons).

⑥ Marital Status

Check one box.

⑦ Occupation

- Please write full contact details of your workplace, including a mailing address (municipality, district/region/state and country)
- Concerning your official position/title, please indicate your current title and 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 and telephone/fax number. In case of an emergency, please include contact details of two family members or friends from 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 information.

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 (study abroad, work, etc.) 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 experiences. Include the dates and positions held.

⑭ Overseas Training

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

⑮ Details of Desired Field of Training

- For section 1, 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 that field of study.
- For section 2, provide a detailed and concrete explanation of your previous work experience in the field of study that you wish to pursue as a trainee.
- **Your explanation will be used by the host institution to determine a suitable course of study for you during your stay. For this reason, please be 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 (2) of section ⑮

⑰ Language Ability

Please check the most appropriate description of your English and Japanese language abilities. 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 therefore is to your disadvantage.

⑱ Language Learning

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

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

⑲ Period Available for Training

Host institutions will decide 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' stay in Japan has been disrupted because they failed to report past (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. If there are any changes to your condition as stated in this document between the submission date of your medical checkup sheet and your day of arrival in Japan, please contact CLAIR immediately as you may also be held responsible for medical costs. Please take care of your health both prior to and after arriving in Japan.

Local Government Officials Training Program in Japan

Trainee Application Form

Photograph (Taken Within the Past 3 Months)
4cm high × 3cm wide

① Applicant Name

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

JOHN BROWN

Please clarify the order of your 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	Postal 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	Postal 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, 2010
Date of Expiration	March 31, 2020	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	Period Attended	Specialization	Qualification(s) 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, etc)

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

- ⑬ Work Experience

Period	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 any overseas training before? ☒ Yes ☐ No ☒ Check the appropriate box.

Country/Hosting Organization	Training Period	Contents of Training (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 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.)

Desired Field of Training : City Planning

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

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 would apply what you have learned in Japan to your work upon returning to your home 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.

- (2) Please provide a detailed description of your work experiences focusing on 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.

①⑥ Experience in Desired Field of Training (Please summarize item (2) of section ①⑤)

Period	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 and basic sentences <input type="checkbox"/> Daily Conversations <input checked="" type="checkbox"/> Can understand Japanese radio or TV <input type="checkbox"/> No trouble understanding native speakers	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily conversations <input type="checkbox"/> Others' opinions about general topics <input checked="" type="checkbox"/> News, speeches, debates
Speaking	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input checked="" type="checkbox"/> Daily Conversations <input type="checkbox"/> Expressing opinions about general topics <input type="checkbox"/> No trouble communicating at all	<input type="checkbox"/> None <input type="checkbox"/> Greetings and basic sentences <input type="checkbox"/> Daily conversations <input type="checkbox"/> Expressing opinions about general topics <input checked="" type="checkbox"/> No trouble communicating at all
Reading	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input type="checkbox"/> Some Chinese characters (characters) <input checked="" type="checkbox"/> Simple newspaper articles <input type="checkbox"/> Advanced newspaper articles	<input type="checkbox"/> None <input type="checkbox"/> Simple sentences with dictionary <input type="checkbox"/> Letters, etc without dictionary <input type="checkbox"/> Simple newspaper articles <input checked="" type="checkbox"/> Advanced newspaper articles
Writing	<input type="checkbox"/> None <input type="checkbox"/> Hiragana <input type="checkbox"/> Katakana <input checked="" type="checkbox"/> Some Chinese characters (300characters) <input type="checkbox"/> Short paragraphs on general topics <input type="checkbox"/> Summaries and expressing opinions	<input type="checkbox"/> None <input type="checkbox"/> Simple sentences with dictionary <input type="checkbox"/> Letters, etc without dictionary <input type="checkbox"/> Short paragraphs on general topics <input checked="" type="checkbox"/> Summaries and expressing opinions

Language	Period/Frequency of Study	Method/Content of Study	Institution	Qualification (s) 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 21/ May/ 2017 ~ / /
Day Month Year

*Training is between 6 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 Sheet. I pledge that the above stated information is true and factual.

1 Day Jan Month 2017 Year

Signature of Applicant John BROWN

(To be filled out by applicant's department head)

I hereby certify that the above Application Form and the attached Medical Checkup Sheet are accurate. I also believe the applicant to be a suitable candidate for this training program, and recommend the applicant wholeheartedly.

2 Day Jan Month 2017 Year

Name of Organization 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:

1. I will observe Japanese laws.
2. 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 institution in Japan.
3. I will not list any false information in documents submitted to MIC, CLAIR, and the host institution 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 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, and to promote friendly ties between my country and Japan, as well as my local government and the Japanese host institution.

Name of Applicant: John BROWN

1 Day Jan Month 2017 Year

Signature: John BROWN

Medical Checkup Sheet

Name John BROWNDate of Birth 11 / June / 1982
Day Month YearSex Male Female (Please circle one)Current Address 1 Main Avenue, Newbridge, Main Province, Canada

- | | |
|---|--|
| 1. Weight <u>70Kg</u> | 10. Hearing <u>Normal</u> |
| 2. Height <u>185cm</u> | 11. Blood Sedimentation
<u>None</u> |
| 3. Abdominal Palpation/
Stethoscope Test
<u>Normal</u> | 12. Tuberculin Reaction
<u>Positive</u> <u>Negative</u> |
| 4. X-Ray <u>Normal</u> | 13. Past Illnesses
<u>None</u> |
| 5. Chest Problems
<u>None</u> | 14. Chronic Illnesses
<u>None</u> |
| 6. Eyesight
<u>With glasses</u>
Left <u>1.0</u> Right <u>1.0</u>
<u>Without glasses</u> | 15. Allergies <u>Milk, pollen</u> |
| 7. Color Blindness
<u>None</u> | 16. Dietary restrictions
<u>Cannot eat pork</u> |
| 8. Blood Pressure
<u>120 / 80</u> | 17. Blood type
<u>O positive</u> |
| 9. Urine Test <u>Normal</u> | 18. Other
<u>None</u> |
| 19. Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Amount: <u>350ml</u> per <u>day</u> /week/month) | |
| 20. Cigarette <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Amount: _____ per day/week/month) | |

I hereby certify that the above details are correct.

Hospital Newbridge General HospitalAddress 100 Average Avenue, Newbridge, Main Province, CanadaDate 1 / January / 2017
Day Month YearCertified by Dr. Sarah SmithSignature Dr. Sarah Smith