**Regional Consultation Event**

by the Kochi Consultation Center for Foreign Residents (Kocoforre)

**Feb 18, 2024 (Sunday) Tosa City**

**Application Form**

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**Please check the ones that apply and complete the form.**

**（　　）　I want to attend the consultation.**

|  |  |  |
| --- | --- | --- |
| ・This form is **required** for those attending the "Status of Residence Consultation".  ・This form is **optional** for those attending the "General Consultation". | | |
| Please fill in the content that you would like to discuss. | Pick your preferred time slot by writing a ✓ in the checkbox | |
|  |  | 10:50～11:30 |
|  | 11:40～12:20 |
|  | 13:20～14:00 |
|  | 14:10～14:50 |
|  | 15:00～15:40 |
|  | Anytime is okay |

Applicants of either consultation will be contacted at a later date to confirm consultation details and schedule. As a general rule, consultations will be held on a first-come-first-serve basis. In addition, depending on the consultation content, applicants may be introduced to other, more relevant, organizations instead.

|  |  |  |
| --- | --- | --- |
| Name |  | |
| Business Name  （For Businesses and Groups） |  | |
| Address |  | |
| Status of Residence |  | |
| Language | ・Japanese 　　　　 　・English　　　　 　・Others（　　　　　　　　　　　　　　　）  \*We may use interpreting services, such as telephone interpreting, for some languages. | |
| Phone & Email Address | tel: | mail: |

**（　　）　I want to attend the seminar.**

**\*No need to fill out the form below if you fill out above form for the consultation.**

|  |  |  |
| --- | --- | --- |
| Name |  | |
| Address |  | |
| Phone & Email Address | tel: | mail: |

**Please wear a mask during the consultation event**

・There is a parking lot available on the day. Please take care of your own belongings when using the parking space, as we will not take responsibility for any losses.

・The information provided here will be properly managed and be used only for this consultation event. It will not be passed on to a third party.