## **Application for MIFA Home Visit Program**

Name							MIFA No.	
Name pronunciation in Hiragana/Katakana							Age	
Nationality							Gender	☐ MALE ☐ FEMALE
Address in Japan	〒 -							
Date of arrival					TEL			
School					Course	baccalaure	ate/maste	r's/doctor's
Major								
Communication proficiency in Japanese language	□ BASIC □ INTERMEDIATE □ ADVANCED  Would you prefer to communicate with your host family in Japanese language?  □ YES □ NO							
Other languages								
Pet friendly	□ YES If NO, (Please describe: ) □ NO							
Meal restrictions	□ YES  If YES, (Please describe: ) □ NO							
Hobbies and interests								
Message for host family								