Attachment

**Uchina Goodwill Ambassador Candidate**

**Résumé Form**

Country (Region): 　　　 　　　　　　　　　 Name of Recommending Organization:

　　　　 　　　　　　　　　　　　　　　　 Name of Representative:\_

 　 TEL:

 　 FAX:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name(Romaji) | ( ) | Date of Birth（Age） | (Year/Month/Day)（　　 ） | Gender:Male / Female |
| CurrentAddress |  | TEL |  |
| FAX |  |
| Postal Code |  | E-mail |  |
| Legal Domicile |  |
| Occupation |  |
| Contact in Okinawa Prefecture(such as a relative or acquaintance) | Name (and relation to this person): |
| Address: |
| TEL |  | FAX |  |
| E-mail: |
| Background &Major Achievements |  |
| Family Structure |  |
| Present Situation ofActivities Concerning Okinawa |  |
| Aspirations andHopes as a Uchina GoodwillAmbassador |  |

 \* Please attach extra pages and provide related material as necessary.