

## Confirmation Form for Proxy Visa Application (Also Used as Application Form)

Please confirm the attached “Terms and Conditions for Undertaking Proxy Visa Application Service” before filling out this form. This form will be required for proceeding with visa application service we will undertake and will not be used for any other purposes.

**\*Items to check before applying : Those who have a Singapore visa valid until the scheduled entry date to Singapore cannot apply.**

If you apply as it is, it will be rejected, so please be sure to check.

In that case, please note that the agency fee and visa fee will not be refunded.

\* Please note that, depending on their nationality some countries require travelers to acquire a visa even in case of transit for changing flights, etc.

Expected Date of Departure				Country for visa application			
Purpose of Travel	<input type="checkbox"/> Study <input type="checkbox"/> Business <input type="checkbox"/> Residence <input type="checkbox"/> Sightseeing			Length of Stay			
	<input type="checkbox"/> Visit for exchange <input type="checkbox"/> Other ( )						
Name in full	(Given name)		(Family name)		Male/Female		Nationality
					Married/Not married [Birth name]		<input type="checkbox"/> Japan <input type="checkbox"/> Other
						( )	
Place of Birth	Prefecture City		Date of Birth	( years)			
Present Address	〒 ( - )			Cell	( )		
	TEL: ( )			FAX	( )		
				E-mail			
Place of Work or School	Name			Section			
	Location			TEL			
Occupation	<Mark the appropriate item with a circle.> <input type="checkbox"/> Company employee <input type="checkbox"/> Company executive <input type="checkbox"/> Company president <input type="checkbox"/> Organization staff member <input type="checkbox"/> Organization officer <input type="checkbox"/> Public servant (National/Local) <input type="checkbox"/> Student <input type="checkbox"/> No occupation <input type="checkbox"/> Medical doctor <input type="checkbox"/> Other ( )						
Contact of choice	Contact for telephone during daytime		Mailing address	<input type="checkbox"/> Present address <input type="checkbox"/> Place of work			
		<input type="checkbox"/> Home <input type="checkbox"/> Place of work <input type="checkbox"/> Cell		<input type="checkbox"/> Other			
		<input type="checkbox"/> Other (TEL: )		( )			
For bearer of valid passport:	Passport No.			Valid until:			

We accept your application and undertake proxy visa application service for you.

Please note that, in the event of cancellation, we will charge cancellation fee predetermined by our company.

• Be sure to sign your name here.

I agree to the “Terms and Conditions for Undertaking Proxy Visa Application Service” and hereby apply for proxy visa application service. I understand that there is a possibility that the examination of visa will not be finished before my desired date of departure.	
Date:	Signature of applicant: _____ (Seal)
(In case an applicant is aged less than 20 years, relevant parental consent is required.)	
	Signature of parental consent: _____ (Seal)