OPEN OPTION JAPANESE COURSE REGISTRATION FORM (Confidential)

Name (block letters) : _					
E-mail :		SC	SOAS ID No. :		
TEL:		N	Mother tongue:		
1) SOAS (UG /PG) 2) Name of Program 3) UG (1 st / 2 nd / 3 ^t 4) PG (Full / Part T	n rd / 4 th Year) ime)	(Other :)
2) Please give the follow* Have you studied Japa			<u>ı uetali</u>	<u>as possible.</u>	
If Yes,	J11030: 10	23 / 140			
When/ Hours of week	where			textbooks us	<u>sed</u>
	1				
	+				
* Qualifications in Japar	l nese langua	re (CCSE A. I	ovol 6	etc).	
Qualifications in Japai	iese iariguaç	ge (000L, A-1	_C v C i , C	÷10).	
* Read and write Hiragana		Yes	No		
* Read and write Katakana		Yes	No		
* Read and write Kanji		Yes	No	about	Kanji
* Have you been to Japan?		Yes	No		
If Yes,					
*When:					
* How long:					.
* What did you do?					<u>.</u>
Any other information:					<u>.</u>
					_
					<u>-</u>
* Please write which lev	el of the test	ts you are goin	g to tal	ke	