

FOR EMBASSY USE
APPLICATION NO: _____
DATE: _____

Application for Accredited Agency for Japanese Visa Application

1. AGENCY

(a) NAME: _____

(b) PRESIDENT: _____

(c) ADDRESS: _____

(d) WEB SITE: _____

(e) E-mail address: _____

(f) TEL: _____

(g) FAX: _____

(h) CAPITAL: _____

(i) DATE ESTABLISHED: _____

(j) NUMBER OF STAFF MEMBERS: _____

(k) NAMES OF STAFF MEMBERS WHO ARE PROFICIENT IN JAPANESE LANGUAGE:

(l) NUMBER OF APPLICANTS YOUR TRAVEL AGENCY APPLIED FOR JAPANESE VISA
(IF ANY):

(YEAR 2018: _____ YEAR 2017: _____ YEAR 2016: _____)

(m) NUMBER OF TOURISTS YOUR TRAVEL AGENCY SENT TO JAPAN:

(YEAR 2018: _____ YEAR 2017: _____ YEAR 2016: _____)

2. BRANCH OFFICE(S) OR REPRESENTATIVE(S) OF THE AGENCY IN THE PHILIPPINES (IF ANY)

(a) NAME: _____

(b) ADDRESS: _____

(c) TEL: _____

(d) FAX: _____

(e) NUMBER OF STAFF MEMBERS: _____

(f) NAMES OF STAFF MEMBERS WHO ARE PROFICIENT IN JAPANESE LANGUAGE:

(Please add sheet as necessary to provide information for all your offices in the Philippines)

DATE: _____

AGENCY'S NAME: _____

PRESIDENT: _____