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| Official use only | |
| Ref. no. |  |

Ochanomizu University 150th Anniversary Project Logo Submission Form

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| (Katakana)  Name |  |
|  |
| (Katakana)  Parent/guardian |  |
|  |
| Affiliation | \* Indicate your current affiliation and school year if you are currently enrolled in Ochanomizu University or an affiliated school. Graduates and former staff should indicate the period of attendance/employment, the relevant school and the current affiliation. |
| Address | 〒  Tel.:  E-mail: |
| Concept outline | (100 – 150 words) |

\* Minors should obtain the consent before filling out the “Parent/guardian” part.