REGISTRATION FORM for WORKMATE

Register WORKMATE now to get information for job opportunities! We will provide you job information in Kansai area based on your skills. Please **FAX** the filled up form to our office **078-779-1572**.

Date of Birth:		Gender: M / F			
Address:					
TEL:		Cell Phone:			
E-mail address:					
Nationality:		Mother Language:			
Status of VISA:					
Length of stay in Jap	oan: (YY/MM)	/			
Ability of Japanasa I					
Ability of Japanese L Listening	anguage: a) Beginner	b) Intermediate	c) Advar	ice	
Speaking	a) Beginner	b) Intermediate	c) Advar		
Reading	a) Beginner	b) Intermediate	c) Advar	ce	
Writing	a) Beginner	b) Intermediate	c) Advar	ice	
Special Skills:					
Can you teach your Mother Language?				a) YES	b) NO
Can you be a Tour Guide Coordinator in your			Country?	a) YES	b) NO
Can you be	e a Translator ar	nd Interpreter?			
(your Mother Language to Japanese Languag				a) YES	b) NO
(Japanese Language to your Mother Language)				a) YES	b) NO
-	ve any special sl			a) YES	b) NO
If you an	iswered YES, wh	at kind of skill are t	hey?		
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What kind of job are	you looking for?				
-					
Do you want to have	any training on	the following field?			
a) Compute		the following field:			
b) Caregive					
-	se Language				
•	eping Training				
e) Child ca					

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