



VERIFICATION OF FULL-TIME STATUS FOR STUDENT MEMBERSHIP

JALT Central Office
Urban Edge Building 5F
1-37-9 Taito, Taito-ku, Tokyo 110-0016
T: 03-3837-1630 F:03-3837-1631 jco@jalt.org

To the Registrar of _____
(Name of institution)

The following individual has applied for membership to the Japan Association for Language Teaching (JALT) as a student member. In order to process this application, we require documentation from your institution verifying enrollment as a full-time student.

Please fill in this form along with a schedule of enrolled classes and return it to the applicant or send it directly to the above address.

I thank you in advance for your kind attention to this matter.

Yours sincerely,
Director of Membership

Name of applicant _____
Address/Tel _____

This is to certify that the above applicant is currently enrolled as a student at our institution undertaking a full-time course load of _____ credit hours from _____ to _____ (enrollment dates).

Signed by _____

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(Registrar)

Date _____

Name of institution _____
Address/Tel _____