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| Документы, подготавливаемые японской стороной  (Заполните либо на японском,либо на английском языке.)  **招　へ　い　理　由　書（数次）**  **Письмо, объясняющее причины приглашения (для многократной визы)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **平成　　　年　　　月　　　日** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | |  | |  | |  | | | | | |  | | | 大使 | | | | | |  | | | |  | | | |  | | | |  | | |  | | |  | | | |  | |  | | | |  | | |
|  | 在 | | |  | | | | 日本国 | | | | | |  | | |  | | |  | | |  | | | | 殿 | | | |  | | | |  | | |  | | |  | | | |  | |  | | | |  | | |
|  |  | | |  | |  | |  | |  | | | |  | | | 総領事 | | | | | |  | | | |  | | | |  | | | |  | | |  | | |  | | | |  | |  | | | |  | | |
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|  | **招へい人** | | | | | | |  | |  | | | |  | | |  | | |  | | |  | | | |  | | | |  | | | |  | | |  | | |  | | | |  | |  | | | |  | | |
|  | （招へい人と身元保証人が同一人の場合には「省略」と記入し，本欄への記入・押印を省略して差し支えありません。） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | 住所 | | | | ： | | 〒 | | |  | | | | － | | | | | |  | | | |  | | | |  | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | |
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|  |  | | 氏名 | | | | ： | | （注） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | |
|  |  | | 電話番号 | | | | ： | | （　　　　）　　　　　　　－ | | | | | | | | | | | | | | | | | | | | | | | | （内線） | | | | | | | | | | | | |  | | |  | | |  | |
|  |  | | FAX番号 | | | | ： | | （　　　　）　　　　　　　－ | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | |  | | |  | | |  | | |  | | |  | |
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|  | 【以下は，会社・団体が招へいする場合に記入してください】 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | 担当者所属先名 | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
|  |  | | 担当者氏名 | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | |
|  |  | | 担当者電話番号 | | | | ： | | （　　　　）　　　　　－ | | | | | | | | | | | | | | | | | | | | | | | | （内線） | | | | | | | | | | | | |  | | |  | | |  | |
|  |  | | ＦＡＸ番号 | | | | ： | | （　　　　）　　　　　－ | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | |
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|  | **査証申請人** | | | | | |  | |  | |  | | | |  | | |  | | |  | | |  | | | |  | | | | |  | | |  | | |  | | |  | | | |  | | |  | | |  | |
|  | （氏名は必ず旅券上のアルファベット表記で記載してください。申請人が複数の場合には代表者の身分事項を下記に記入の上，申請人リストを作成し，添付してください。） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | 国籍 | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | |  | |  | |
|  |  | | 職業 | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | |  | |  | |  | |
|  |  | | 氏名 | | | | ： | |  | | | | | | | | | | | | | | | | | | | | | | | | | （男・女） | | | | | | | | | | ほか | | | |  | | 名 | |  | |
|  |  | | 生年月日 | | | | ： | | 西暦 | | | |  | | | | | 年 | | |  | | | | 月 | | | |  | | | 日生 | | | | |  | | | | 歳 | | |  | | | |  | |  | |  | |
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|  | **上記の者の招へい目的等は次のとおりです。** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | （（1）及び（2）については，今回招へいするに至った目的，経緯の詳細について記入してください。）  （本欄に記入しきれない場合は，「別紙のとおり」と記入し，別紙を作成してください。） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | (1) | | | | 招へい目的 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (2) | | | | 招へい経緯 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | (3) | | | 申請人との関係 | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | (4) | | | | 数次査証を必要とする理由・今後の訪日予定 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | (5) | | | 過去における訪日歴（出来る限り年月日まで記載） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| (注) | 会社･団体等が招へいする場合 | ： | 会社・団体名及び役職名を記入の上，代表者印，役職印又は社印を押印してください（私印不可）。押印が困難な場合は所属機関の然るべき役職の方が署名してください。 |
| 外国籍者等で印鑑がない場合 | ： | 署名してください。 |