APPLICATION FORM

for official recognition of the "Events commemorating the 20th Anniversary of the Diplomatic Relations between Japan and Armenia"

The items marked with ** will be published in the Official Events Calendar.

Applications with inappropriate description may not be subject of the examination.

If the column space is not enough, please put attachment.

Name of the event**	Japanese	
	English	
Period of the event**	From / / To / / (DD/M	IM/YY)
Venue of the event**	Japanese	
	English	
Organizer of the	Japanese	
event**	English	
Organizer's status	Please check one of the below: Government institution Local Government and/or its related organization Public utility corporation School/University Business enterprise Cultural organization Non-Governmental non-profit organization Other ()	
Person in charge	Name:	
of this application	Position:	
Contact information of the Organizer	Address:	
	Person in charge: E-mail:	
Website of the	Tel: Fax:	
Organizer**	URL:	
Purpose of the event		
Outline of the event		
Type of the Event	Please check below: (Multiple check is acceptable) Academic/Research Music Art Theatrical Dance Regional exchange Economy Sales promotion Education Sports Exhibition Tourism Movie/TV Youth exchange Life style Other ()	
Please check one of the below:		
□ This event will be held under the umbrella of another (bigger) project (e.g. festival, symposium etc.).		
$\rightarrow \qquad \text{[Name of the project:} \qquad \text{]}$		
 This event will be held as an independent undertaking. Please check below: (Multiple check is acceptable) 		
Form of the event	 Frease check below. (Multiple check is acceptable) Festival Performance/Concert Exhibition Conference Seminar/Lecture Workshop Competition Human exchange Training Volunteer activity TV program Movie/Video Book Other () 	
Counterpart/ Co-	Japanese	
organizer of the other country	English	
Financing of the event	Please check below: (Multiple check is acceptable) □ Official finance □ Assistance from a business enterprise □ Donation □ Admission □ Membership fee □ Own finance □ Other ()	
Organizational stage	Please check the below: (Multiple check is acceptable) Decided Planning stage Only concept Other ()	