

no.

Koganecho Bazaar 2021 Training Program AIR Manager Internship Application Form

NPO Koganecho Area Management Center
Chairman

Date: / /

Name			Nationality
Date of Birth	/ /	Age: _____	
Address	(Country: _____)		
Contact Details	E-mail: _____	Telephone: _____	
Affiliation (optional)			
Personal History	Education, work experience etc.		
Languages	English <input type="checkbox"/> Conversational <input type="checkbox"/> Business <input type="checkbox"/> Native Other languages (_____)		
Special Skills / Qualifications	Including certifications, software skills, driving skills, etc.		
Desired Internship Period	_____ ~ _____ (total of _____ months)		
What is your motivation? Would you like to learn through this internship?			
Personal Statement			