**ANNEX 2**

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|  | **The 1st Meeting of APT Preparatory Group for WTSA-20 (APT WTSA20-1) and** **31st APT Standardization Program Forum (ASTAP-31)**11-15 June 2019, Tokyo, Japan |
| **VISA SUPPORTING LETTER REQUEST FORM** |
| **PERSONAL INFORMATION:**  |
| First Name (Mr./ Ms./ Mrs./ Dr.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Last Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Administration/Organization Present Post (Title) Business Address (PO BOX not allowed) City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Where you live)Phone No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **PASSPORT INFORMATION:**  |
| Passport No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Birth Expiry Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of getting visa  |
| **FLIGHT INFORMATION:** |
| Arrival Flight No.  Arrival Date Arrival Time  Arrival Airport **🖵** Narita Airport **🖵** Haneda Airport **🖵** Other (airport name: )Departure Flight No.  Departure Date Departure Time  Departure Airport **🖵** Narita Airport **🖵** Haneda Airport **🖵** Other (airport name: ) |
| **HOTEL INFORMTION:** |
| Hotel Name Hotel address Phone No. \* This information is NOT for hotel reservation, but NECESSARY for schedule of stay in VISA support documents. |
| Signature. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date  |
| NOTE: Please use CAPITAL LETTERS to complete the form and return it to:  **Visa Support Team for WTSA20-1/ASTAP-31** (Do not send it to the APT Secretariat) with the subject of E-mail "WTSA20-1/ASTAP-31 Visa Support" Email: hostsec-visa@ml.soumu.go.jp  |