

Sister School Exchange Form (学校交流希望調査票)

Please fill in the form in English. (英語でご記入ください)

Title (肩書)	English Teacher	First Name (名) Tazuko	Last Name (姓) Tsuchiya
Your E-mail (E-Mailアドレス)		tazymelb@hotmail.com	
School Name (学校名)		Yonezawa Chuo High School	
School Address (学校住所)	7-5-70-4 Chuo Yonezawa-Shi Yamagata-Ken 992-0045		
Phone (incl. country code) (電話(国番号を含む)) eg. (例) 61-2-1234-5678	81-238-22-4223		
Fax (incl. country code) (ファックス(国番号を含む)) eg. (例) 61-2-1234-5678	81-238-22-4224		
School Website (学校HP)	http://www.vchuo-h.ed.jp/app-def/S-102/wp/		

Q 1. Does your town/city/village already have a Sister City in Japan? (Yes/No, if Yes, please write the name of the city/town/village)
 (そちらの自治体はオーストラリア/ニュージーランドの自治体と姉妹都市提携をしていますか? (はい/いいえ、はいの場合は自治体名もご記載ください))

No, we do not have a sister city in Australia/New Zealand.

Q 2. Reason(s) for wanting a Sister School (姉妹校を結びたい理由は何ですか?)

We are not particular about creating a sister school immediately. It would be great if we can start off gradually, maybe through pen pal or exchanging emails. Then, if we can develop into creating a sister school relationship in the end, it would be ideal. Concerning the reasons for wanting to create a relationship with an Australian school, I myself studied abroad in Melbourne and have always dreamt of connecting my second hometown with my first hometown. Once we are able to become sister schools with an Australian school, we'd like to do an exchange program. Currently, we have a program where we do homestay with a Hawaiian high school however, the time difference brings about problems in communications and travel. Australia, on the other hand has hardly any time difference with Japan, and is also a very diverse community, which makes it an ideal environment for our students to experience an "international atmosphere" firsthand.

Q 3. Do you have a specific place in Japan where you want to establish the relations? (特に指定したいオーストラリアの自治体)

City or Town's Name (自治体名) Melbourne/Greater Melbourne

Q 4. What type of Sister School would you prefer? (Please tick)
 (どのような種類の学校と姉妹校提携をしたいですか? (あてはまるものにチェックを入れてください))

Primary (小学校)	<input type="checkbox"/>	Junior High (中学校)	<input type="checkbox"/>	High (高等学校)	<input checked="" type="checkbox"/>
Boys' (男子校)	<input type="checkbox"/>	Girls' (女子校)	<input type="checkbox"/>	Co-educational (共学校)	<input checked="" type="checkbox"/>
Public (公立)	<input type="checkbox"/>	Private (私立)	<input type="checkbox"/>		

Or do you have a specific school in mind? (あるいは、具体的に考えている学校はありますか?)

No

Q 5. What are the ages of your students? Class size? (貴校における生徒の年齢は? /クラスの規模は?)

Ages 15~18, class sizes are roughly 20~35 students per class

Q 6. Do the students want to communicate in English or Japanese?
 (貴校は日本の学校とのコミュニケーションを英語と日本語のどちらでしたいですか?)

English

Q 7. Will other teachers (and/or the principal) be involved in this initiative? (他の先生方(校長含む)から協力は得られますか?)

Regarding the pen pal project, one other teacher will be involved, and we also have the support of the principal.

Q 8. Can we put this information on our website?
 (この情報を当ホームページ上に公開してよいですか?)

Yes (はい)	<input checked="" type="checkbox"/>
No (いいえ)	<input type="checkbox"/>