

Date of filling in this form (YYYY/MM/DD): / /

To: Japan International Science and Technology Exchange Center

Request Form for Disclosure/Amendment of Private Information

I request for private information held about me by the aforementioned center to be disclosed/amended as outlined below.

Subject of the Disclosure				
	Full Name	Signature:		
	Address	〒		
	Telephone Number			
	E-mail Address			
• Details of request relating to your personal information (Please circle the item of your request)		1. Disclosure of Personal Information 2. Modification/Correction 3. Discontinuation of Usage 4. Other ()		
• Circumstances in which your personal information was shared with the center				
• Details of corrections/modifications to be made				
• Means of informing the outcome of the request process (Please circle your desired method)		1. Telephone 2. E-mail 3. Post 4. FAX		
【Section to be filled out by a proxy】				
Name of Proxy		Signature:		
Address				
Telephone Number		E-mail Address		
【Accompanying documents】				
1.Proof of identity (Copy of Driving License ・ Health Insurance Card ・ Passport ・ Other ID ()) ※Proof of address is not required 2.In case of proxy ・ Letter of attorney ・ Proof of identity of the person concerned (Copy of Driving License ・ Health Insurance Card ・ Passport ・ Other ID ()) ※Proof of address is not required				