**APPLICATION FORM** (Basic Seminar for Warehouse Management)

※Please write in Japanese or English

|  |  |  |
| --- | --- | --- |
| Company  Name  (会社名) | English |  |
| Japanese |  |
| Company Type  (Check the relevant box □.)  業種 | | □　Manufacturing company  □　Trading company  □　Retailer company  □　Logistics company  □　Other（　　　　　　　　　　 　　　　　　　） |
| Administration Person  or  Manager  派遣責任者 | Job/Position |  |
| Address of work |  |
| Tel. |  |
| E-mail |  |
| Name in full |  |
| Participant 1  参加者１ | Job/Position |  |
| Address of work |  |
| E-mail |  |
| Name in full |  |
| Participant 2  参加者２ | Job/Position |  |
| Address of work |  |
| E-mail |  |
| Name in full |  |

※Please fill out the required fields in the application form and send to the email address below.

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