提出日： 年 月 日

Submission Date： Year Month Day

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 団体名  Organization | English | ＊必須 | | | | | | | | | | | | | | | |
| Japanese |  | | | | | | | | | | | | | | | |
| 活動内容  Description |  | | | | | | | | | | | | | | | | |
| 活動登録期間  Period of registration | 登録承認日　 　から 　イベント終了後2週間　 　　　まで  From the day of approval to two weeks after the last day of the event | | | | | | | | | | | | | | | | |
| メンバー数  Number of members   * 3人以上   Must be three members or more | 総数  Total number | | | 本学学生  No. of APU students | | | | 学外者  No. of students outside APU | | | | | | | | | |
| 名 | | | 名 | | | | 名 | | | | | | | | | |
| 代表者  Representative    役職名 Title  [ ] | 氏名  Name | |  | | | | | | | | | 回生  Year of college | | |  | | |
| 学部  College | |  | | 学籍番号  Student ID | |  | |  |  |  | |  |  | |  |  |
| 住所  Address | | 〒 | | | | | | | | | | | | | | |
| 電話番号  Phone | | ＜ Home ＞  ＜Portable＞ | | | e-mail | |  | | | | | | | | | |
| 副代表  Deputy Representative  役職名 Title  [ ] | 氏名  Name | |  | | | | | | | | | 回生  Year of college | | |  | | |
| 学部  College | |  | | 学籍番号  Student ID | |  | |  |  |  | |  |  | |  |  |
| 住所  Address | | 〒 | | | | | | | | | | | | | | |
| 電話番号  Phone | | ＜ Home ＞  ＜Portable＞ | | | e-mail | |  | | | | | | | | | |
| 会計責任者  Accountant  役職名 Title  [ ] | 氏名  Name | |  | | | | | | | | | 回生  Year of college | | |  | | |
| 学部  College | |  | | 学籍番号  Student ID | |  | |  |  |  | |  |  | |  |  |
| 住所  Address | | 〒 | | | | | | | | | | | | | | |
| 電話番号  Phone | | ＜ Home ＞  ＜Portable＞ | | | e-mail | |  | | | | | | | | | |

* メンバーリスト、企画書を添えて提出してください。

Submit this form along with a member list and a detailed activity plan.

For office use only

|  |  |  |  |
| --- | --- | --- | --- |
| 受付 |  | 承認日 | 課長印 |
|  |  |  |  |