

## 2020 JAPAN EXCHANGE AND TEACHING (JET) PROGRAMME

### Authorisation and Release Form

I, (Name) \_\_\_\_\_,  
born at (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country) \_\_\_\_\_,  
on (Date of Birth) \_\_\_\_\_, have applied to participate in the Japan  
Exchange and Teaching (JET) Programme, and hereby authorise and request that any law  
enforcement agency having control of any documents, records or other information related to  
me, provides to the Embassy of Japan or the Consulate-General of Japan, at its request, any  
such information. I also allow the Embassy of Japan or the Consulate-General of Japan to make  
copies of these documents, records or other information.

I hereby release, discharge, and exonerate the Embassy of Japan or the Consulate-General of  
Japan, its agents and representatives and any person who provides information from any and  
all liability of every nature and kind arising from the provision or inspection of such documents,  
records, and other information.

Signature of Applicant \_\_\_\_\_  
(Sign by hand)

Date \_\_\_\_\_  
(DD/MM/YYYY)