

Republic of the Philippines **Bepartment of Education**



OCT 0 4 2007

DepED MEMORANDUM No. 309, s. 2007

JAPAN-EAST ASIA NETWORK OF EXCHANGE FOR STUDENTS AND YOUTHS (JENESYS)

To: Regional Directors
Schools Division/City Superintendents
Heads, Public and Private Secondary Schools

- 1. The AFS Intercultural Programs Philippines, in cooperation with the Department of Education (DepED), is opening the application for the Japan-East Asia Network of Exchange for Students and Youths (JENESYS) which will be held in Japan on December 8-21, 2007. To be held together with students and teachers from Australia, New Zealand, Thailand, Malaysia, Indonesia and India, the Philippines has sixty (60) slots for students and six (6) slots for teachers.
- 2. JENESYS aims to create a commonly shared future vision for the region towards forming a strong solidarity among Asian countries and to foster the establishment of good sentiments towards Japan among Asian countries by promoting mutual understanding through youth exchange within the region.
- 3. The general activities during the JENESYS include study tours, attendance in Japanese schools and homestay. Teachers will basically attend the same program for students with variations which will be prepared by the AFS national or local chapters in Japan.
- 4. To qualify, applicants should
 - a. understand and agree to the aims of the JENESYS;
 - b. be enrolled in high school (4th Year) or equivalent in the home country at the time of the application;
 - c. be 15-18 years old upon arrival in Japan;
 - d. be capable of adjusting themselves of family life abroad:
 - e. have the ability to conduct daily conversation in English or Japanese (best efforts only); and
 - f. not have joined a similar invitation program to Japan (preference).
- 5. Interested applicants are required to pay an application fee of Five Hundred Pesos (PhP500.00) and submit the enclosed Program Application Form, duly filled up, on or before October 19, 2007 to the AFS Returnees Foundation Philippines, Inc. with address at 2/F UP-ISSI Building, Jacinto St., University of the Philippines, Diliman, Quezon City and contact nos.: (02) 928-3432 or (02) 929-5750.

- 6. All expenses of selected participants while in the host country, including their roundtrip airfare shall be borne by Japan except for the travel expenses to and from the city/province (place of origin) in the Philippines of the participants which shall be charged against local funds, local school board funds or sourced from solicitations from private organizations. Expenses incurred for the issuance of passport shall be borne by the applicant.
- 7. Regional Directors, Schools Division/City Superintendents and School Heads are requested to give full support to the program. The Division and Regional Supervisors in-charge of the Student Government Program or Araling Panlipunan shall be responsible for disseminating the contents of this Memorandum to the schools and for coordinating participation of interested students and teacherapplicants.
- 8. For queries and coordination, please contact the AFS Returnees Foundation, Inc. c/o Acting National Director Elizabeth Venzon-Eduave at the above-cited contact numbers or the DepED Center for Students and Co-Curricular Affairs (CSCA) c/o Executive Director Joey G. Pelaez at tel. nos.: (02) 631-8495 or (02) 636-3603.
- 9. Immediate and widest dissemination of this Memorandum is enjoined.

RAMON C. BACANI Undersecretary

Encl.:

As stated

Reference:

None

Allotment: 1—(D.O. 50-97)

To be indicated in the <u>Perpetual Index</u> under the following subjects:

PROGRAMS STUDENTS TEACHERS

Sheila, MPPD-TS, <u>DM JENESYS</u> October 2, 2007

PROGRAM APPLICATION • • FORM

NAME Last (Family) Name	Middle Name(if you have)		First Name	Preferred Name /Nickname
()Male ()Female	Age (As of December 1st,	2007)• • •	• • • Years old	
Address					PHOTO
		Co	ountry		
rance and the second		Birth Date	I associa	/ 19	
TEL: (•• FAX.(••)	kg Height	cm	
Email:(Contact: Number) Religion			
Name (Rel					Did Detected and Abstract
Family Father		Name		Occupation	Birth Date (day/month/year)
Mother		and and the second desired and the second desired and the second desired and the second desired and the second	a marina de la desperada		
	No. 1. Control of the second s		1-54-4		
	and a second	en e	and the second		
·		and the commentation of the finance of the state of the s	mark to the state of the		
For Visa Purp		The second secon	Country of Cit	izonahin	
Country of Birth Passport Number (if known)			Country of Cit Passport Issue		
			Passport Expir	ation Date	and the second s
RESTRICTION a: Do you have If yes, pleas	e any dietary restriction	aking an appropriate placement, ons, including for religious or med	indicate if you h dical/allergic rea	ave any: asons? ()Ye	es ()No
If you are a	vegetarian for religio	us reasons, are you willing to eat	t: () Fish ()	Chicken () E	Dairy products () Egg?
b: Do you have If yes, please i	e any allergies to food dentify type, allergen	d, pets, medicine, plants and othe , frequency of symptoms, duratic	er conditions? on, date of last s	() Yes (symptom, and trea) No atment.
c: Have you ta If yes, pleas	ken, during the past se identify the medica	year any oral or injected medicat tion, dosage and reason for usa	ion? () Yes ge:	() No	
LANGUAGE SKILLS – Indicate prof abbreviations: Fluent=FL, Good=GD, I			Visiting Experience to Japan Have you ever visited Japan? () Yes () No If yes, write down detail (when, where, which program)		
Language Y English•• Japanese		sing Reading Writing	, ,	(. ,
PI ACEMENT	INFORMATION				

Tell us about your goals	s or plans which are important	to you:
What do you hope to ga	in from the program?	