|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **【様式 1-2】　（生徒用）**  **APRSAF-27水ロケット大会　（作文用紙　　P１/全2枚）** | | | | |
| ふりがな  氏　名 |  | 中学  高校 | 年 | チーム名 |
| 学校名・団体名 |
| 下記のどのお知らせを見て募集を知りましたか？  □宇宙教育センターのウェブサイト□宇宙教育センターのTwitter　□先生/指導者/友人から聞いた  □そのほか（　　　　　　　　　　　　　） | | | | |
| 記入上の注意事項：  記入は黒のボールペン、または濃い鉛筆を用いてください。 (修正液/修正テープ使用可）  共著は不可とします。 | | | | |
| **１.応募動機はなんですか（３００字以内）** | | | | |
|

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 10 |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 16 |
|  |  |  |  |  |  |  |  |  |  |  |  | ３００文字以内（18×16+12） | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **【様式 1-2】（生徒用）　　APRSAF-27水ロケット大会　（作文用紙　P2/全2枚）** | | | |
| 氏　名 |  | チーム名 |  |
| 1. **オンラインシステムを利用し、日本代表チームで英語での日本の紹介（ビデオで撮影していただく可能性あり）、またアジア太平洋地域の仲間と、英語で交流していただく予定です。**   **期待する事、意気込みを記入してください。（３００字以内）** | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 10 |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 16 |
|  | |  |  |  |  |  |  |  |  |  |  |  | ３００文字以内（18×16+12） | | | | | |
|  | | | | | | | | | | | | | | | | | | |

ご記入いただいた情報は、本事業に使用し、その他の目的のためには使用いたしません。