くずし字ワークショップ2020申込用紙

APPLICATION FORM

氏名 (Name):

所属 (Affiliation):

職名 (Job title):

Email address:

これまでに受講したNIJL/EAJRSくずし字講座、もしくは他のくずし字・古典籍研修:

NIJL/EAJRS Workshops or other workshops related to Kuzushiji you have attended:

所属機関が所蔵する日本古典籍資料の概要:

Japanese antiquarian material collections held by the organisation you work for: