

Invitation Program for JETRO Zone at JAIMA SHOW 2009

Application Form (A)

The information collected in this form (Form A) will be used by JETRO and the Fair Organizer to determine your eligibility, and for program planning and evaluation.

Company name					
Address				City	
State/province		Country		Post/ZIP code	
Website URL					
Exclusive Agent in Japan	<input type="checkbox"/> Yes <input type="checkbox"/> No		Agent in Japan	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Primary contact	Mr./Ms.	(First)		(Middle)	(Last)
Title				Dept.	
Telephone:	(+)		ext:	Fax:	(+)
Email					

The person(s) who will be attending the event:					
Mr./Ms.	(First)		(Middle)		(Last)
Title				Dept	
Email					
Type of exhibit	Product names	Description			
	1.				
	2.				
	3.				
	4.				
<input type="checkbox"/> Brochures <input type="checkbox"/> Other promotional materials () Please submit this form together with brochures that include your company's profile and descriptions of products exhibited.					

The undersigned (exhibitor) hereby applies for participation in the Invitation Program for JETRO Zone at JAIMA SHOW 2009 in accordance with the "Rules & Regulations for JETRO's Invitation Program (Trade Fairs)"

Signature: _____ Date: _____
 Print Name (*): _____
 Title(*): _____
 (*Please print in block letters)

*既存案件 <input type="checkbox"/> →	*案 件 番 号 :
*新規案件 <input type="checkbox"/> →	*案件申請公信番号 :
管轄センターコメント	

The above section written in Japanese is for JETRO's internal reference use.

*必須項目：管轄センターは案件番号（既存）/対日ビジネス課宛案件認定申請公信番号（新規）のいずれかの情報を必ずご記入ください。

Application Form (B) (JETRO use only)

The information collected in this form (Form B) is intended solely for activities associated with the invitation program, and will not be released to third parties. Please complete this form in its entirety and provide as much information/detail as possible, particularly in defining the competitive advantages of your products/services/technologies. Note that by leaving any sections of this form blank, your chances of selection will be significantly reduced.

1. General Business Information

No. of Employees		Date established		Paid in capital	
CEO/President	Mr./Ms.	(first)		(last)	
Your firm's technology fields/areas					
Your products/services/technologies Please describe <i>in detail</i> your (1) products/services/technologies, placing an emphasis on their (2) relative <u>strength</u> , <u>differentiation</u> and (3) <u>competitive advantages</u> , compared to other firms; please also specify your target markets/segments, etc.					
Business Status (e.g. recent sales trends, major investors, announcements, etc.)					
Your major clients (Please also use this space to list any awards/achievements)					
Have any of your products/services/technologies been localized to the Japanese market?					
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Considering					
Do you have an overseas subsidiary(s)?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, where?					
What other overseas business experience – excluding Japan – do you have? (For example, international sales record, number of countries you do business in, distributors, number of years in those countries, etc.)					

Your major competitor(s)	
Your primary investor(s)/VC(s)?	

2. Details on Types of Partnership(s) Sought

What type of business arrangement/contract/partner are you seeking? Please specify your ideal Japanese partners and criteria for such partners.
Please list names of specific Japanese firms or industries you would like to meet, if any. (Please include division/department, if known)

3. Current Business Activities in Japan

What is your CURRENT businesses activity in Japan? (Check "Other" if you have PRIOR experience)	
<input type="checkbox"/> None <input type="checkbox"/> Representative office <input type="checkbox"/> Sales office <input type="checkbox"/> Affiliated company <input type="checkbox"/> Other	
Please describe in detail.	
Do you have Japanese distributor(s) / agent(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which company(s)?	
Is this company(s) an exclusive distributor/agent?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you already have an operation in Japan?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please describe your business plan or model to be applied to expansion in Japan:			
Do you have plans to set up an office in Japan?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what is your time frame and what type of business operation would you like to establish?			
<input type="checkbox"/> 0-6 months <input type="checkbox"/> 6 months-1 year <input type="checkbox"/> 1-3 years <input type="checkbox"/> More than 3 years		<input type="checkbox"/> Branch office <input type="checkbox"/> A wholly owned subsidiary <input type="checkbox"/> JV <input type="checkbox"/> M&A <input type="checkbox"/> Not sure (would like more information on options available to me)	
What is your funding strategy regarding your Japan expansion plan?			
Estimated amount of investment.			
Location of planned investment.			
Estimated number of employees.			