

2018 4-Koma Manga Contest
University Student and Adult Division Submission Form
Consulate General of Japan in San Francisco

Please read the contest rules and complete the form below.

Submitted Manga works will NOT be returned.

Name: _____ Citizenship: _____

Address: _____

E-mail / Daytime Phone: _____

Title of 4-koma manga: _____

(if applicable) School Name and address: _____

(if applicable) Japanese Instructor's Name: _____