Fill out the application by following a sample and check the appropriate box ☑ as below.

Dates of submit the application:

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Kana | |  | | | | | | Photo  （4×3）  Taken within the last 6 months |
| Name (in Japanese) | | signature | | | | | |
| Name 　　　　(Roman alphabet) | | 印 | | | | | |
| Name 　　　　(Native language) | |  | | | | | |
| Birthday | | (Age: ) | | | | Gender | * Male * Female |
| E-mail | |  | | | | Nationality |  |
| Current Status  □a student  □an employment  □an unemployment  □others | | Details of your current university, Japanese language school or occupation.  Name of organization:  Address:  Zip Code:  Tel: | | | | | | |
| Current  Living Address  \*Write a mail address UEC send documents | | Zip Code:  Tel: | | | | | | |
| Home Address | | Zip Code:  Tel: | | | | | | |
| Guarantor in Japan | | \*If the guarantor is not in Japan, please enter the guarantor in your home country.  Name:  Relationship to the Applicant：  Profession:  Address:  Zip Code:  Tel:  E-mail:  \*Please fill in the information correctly as we may contact your guarantor directly regarding the details. | | | | | | |
| Last Academic  Background  \*Last academic school received a degree.  Do not include any  Japanese language  school | | Name of school:  Department:  Major:  Graduated/Expected graduate dates: | | | | | | |
| Subject of Study | |  | | | | | | |
| Confirmation of an  academic supervisor  and a head of  department | | | Name of an academic supervisor:  Name of department: | | | | | |
| Please ask your academic supervisor to fill out the “Academic Supervisor  Confirmation Form (Form 3)” and submit it to the International Student Office (ISO). ISO considers your application approved by directly receiving it from the supervisor.    \*It would be very appreciated if an academic supervisor could explain  the acceptance of the student to the head of department and obtain  approval. | | | | | |
| Do you take another  entrance examination?   * Yes * No | | | If you answer ☑Yes, write the name of university and department/Course  Name of the university:  Department/Course: | | | | | |
| Who will pay the  application fee?  (Only domestic bank  transfer can be  accepted) | | | Name： | | | | | |
| Relationship to the Applicant：□the applicant himself/herself  □others ( ) | | | | | |
| E-mail： | | | | | |
|  |  | Duration  (Year) | | Year/  Month | Educational and Career Background | | | |
| Elementary  School | Enrollment |  | |  |  | | | |
| Graduation |  |  | | | |
| Junior High  School | Enrollment |  | |  |  | | | |
| Graduation |  |  | | | |
| High School | Enrollment |  | |  |  | | | |
| Graduation |  |  | | | |
| University | Enrollment |  | |  |  | | | |
| Graduation |  |  | | | |
| Others |  |  | |  |  | | | |
| Others |  |  | |  |  | | | |
| Others |  |  | |  |  | | | |
| Others |  |  | |  |  | | | |
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I pledge that the information given in this application form is true and accurate.

\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ /\_\_\_\_\_\_\_

(Year) (Month) (Day)

Applicant’s Signature