

Application for Research Students, October 2024

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

Dates of submit the application:

Kana				Photo (4×3) Taken within the last 6 months
Name (in Japanese)	signature			
Name (Roman alphabet)				
Name (Native language)				
Birthday (Age:)	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
E-mail		Nationality		
Current Status <input type="checkbox"/> a student <input type="checkbox"/> an employment <input type="checkbox"/> an unemployment <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No		If you answer <input checked="" type="checkbox"/> 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 : <input type="checkbox"/> the applicant himself/herself <input type="checkbox"/> 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				

I pledge that the information given in this application form is true and accurate.

_____/_____/_____
(Year) (Month) (Day)

Applicant's Signature_____