Application for Berserch Students, October 2024 Sample

Fill out the application by following a sample and cneck the appropriate box \square as below.

		es of submit t	he application:	11			
Kana *′	Free is also a signatur	e space at 1	the end.				
Name (in Japanese	Please don't forget to fill it out. Photo						
			Signature	(4×3) Taken within			
Name				the last 6			
(Roman alphabet)	DENTSU HANAKO months						
Name (Native language)	电通 花子						
Birthday	$\begin{array}{ccc} \times \times & \times, 20 \times \times \\ & (\text{Age: } \times \times &) \end{array}$	Gender	□ Male ✓ Female				
E-mail	$\times \times \times @ \times \times .co.jp$	Nationality	Chinese	-			
Current Status	Details of your current univ	versity, Japane	ese language scho	ol or occupation.			
⊿ a student □an employment	Name of organization: The University of Electro-Communications						
□an unemployment □others	Address: 1-5-1 Chofugaoka, Chofu- city, Tokyo Japan						
	Zip Code:182-8585 Tel: +81-42-443-5117						
Current Living Address *Write a mail address	1-29-1 Gakuen nishimachi, Kodaira-city, Tokyo Japan Hitotsubashi International House						
UEC send documents	Zip Code: 187-0045 Tel: $+81 \times \times \times$						
Home Address	$\begin{array}{c} \times \times \\ \times \times \times \times \end{array}$						
	$\begin{array}{llllllllllllllllllllllllllllllllllll$						
Guarantor in Japan	*If the guarantor is not in country.	Japan, please	enter the guaran	ntor in your home			
Name: $\times \times$ Relationship to the Applicant : $\times \times$ Profession: $\times \times$							
$\begin{array}{llllllllllllllllllllllllllllllllllll$							
	E-mail:						
	*Please fill in the informat directly regarding the details		as we may contac	ct your guarantor			

	Last Academic Background *Last academic school received a degree.		Name of school: the university of $\times \times \times$ Department: $\times \times \times$ Major: $\times \times$					
D D	Do not include any Japanese language school		Graduated/Expected graduate dates: $\times \times \times \times, 20 \times \times$					
S	Subject of Study		Research of $\times \times \times \times$					
	Confirmation of an academic supervisor and a head of department		Name of an academic supervisor: Ryuichi Kokusai					
a			Name of department: Department of Informatics					
d			Please ask your academic supervisor to fill out the "Academic Supervisor Confirmation Form (Form 3)" and submit it to the International Student Office					
	Request a confirmation to our academic supervisor.		(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 a		If you answer 🗹 Yes, write the name of university and department/Course					
e ? [entrance examination ? □ Yes □ No		Name of the university: Department/Course:					
	Who will pay the application fee? (Only domestic bank transfer can be accepted)		Name : Taro Dentsu					
(0			Relationship to Applicants : the applicant himself/herself for the provide the provided of t					
			E-mail : $\times \times \times @ \times \times .co.jp$					
			Duration (Year)	Year/ Month	If you cannot make payment by yourself, $\mathbf{E}_{\mathbf{C}}$ such as an international applicant, please			
	lementary chool	Enroll ment Gradua	6 years		ask for a proxy agent and fill out the Enrolled in > information of him/her.			
T	unior High	tion Enroll		20XX/X	Graduated from $\times \times \times$ elementary school			
	chool	ment	3 years	20XX/X	Enrolled in $\times \times \times$ junior high school			
		Gradua tion		20XX/X	Graduated from $ imes imes imes$ junior high school			
Η	ligh School	Enroll ment	3 years	20XX/X	Enrolled in $\times \times \times$ high school			
		Gradua tion			Graduated from $\times \times \times$ high school			
U	niversity	Enroll ment	4 years		Enrolled in the University of $\times \times \times$			
		Gradua tion	4 years		Expected to graduate from the University of $\times \times \times$			
0	thers							
	thers							

Others		

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

Please don't forget to fill it out.

 $\frac{/}{(\text{Year}) \quad (\text{Month})} \quad \frac{/}{(\text{Day})}$

Applicant's Signature