

Entry Example

University of Tsukuba Graduate Admissions 2018

Application Form

| |
|--|
| Doctoral Programs (four-year) |
| February |
| General Admission Working Individuals |

For the "Application Method" and "Status at the Time of Application," circle the number that applies.

See the List of Research Supervisor Groups for details on the Cooperative Graduate School System.

If you are granted Monbukagakusho scholarship, circle "1." If not, circle "2."

Fill in or circle the following items. The fields marked with ※ should be left blank.

| | | |
|-----------------|---|------------------------------------|
| Examinee Number | ※ | These fields should be left blank. |
|-----------------|---|------------------------------------|

| | | | | | | | | | |
|-----------------------------------|---------------------|-----------------------------|----------------------------|---|------------------------|-------------------------|-------------------------|------------------|---|
| Application Method① | General Admission 1 | Working Individuals 2 | Transfer Admission 3 | Application Method② | Cooperative Graduate 1 | Research Institute Code | Research Institute Code | Entrance in Fall | 4 |
| Status at the Time of Application | Student 1 | Worker (except part-time) 2 | Research Student/ Others 3 | Foreign Student Status at the Time of Application | Government Sponsored 1 | Privately Funded 2 | Legal Domicile | | |

| | | | | | | | |
|------|---------------------|---|-----|---|--------|-----|-----|
| Name | TSUKUBA Taro | | Sex | Date of Birth (Gregorian calendar)/ Age | | | |
| | M | F | 1 | 2 | ○○○○ Y | ○ M | ○ D |

| | | | |
|-----------------|---|---------------------------|--|
| Present Address | ○○○ Apartment B-305, 5-3 Amakubo, Tsukuba-city, Ibaraki-ken 305-0035 | | |
| | [Phone ○○○(○○)○○○] | [Cell Phone ○○○(○○○)○○○] | |
| | [E-mail address : ○○○○@○○○] | | |

| | | | | |
|--------------------------|---------|--|---------------|---------------|
| Reference (Inside Japan) | Name | ○○○○ | Relation-ship | Father |
| | Address | O-O-O Shimotakatsu, Tsuchiura-shi, Ibaraki-ken 305-0035 [Phone ○○○(○○)○○○] | | |

| | | | |
|---|--|--|---|
| Graduate School Name/ Code | Program Name/ Code | Research Field/ Supervisor | Fill in the fields enclosed by heavy lines. |
| Graduate School of Comprehensive Human Sciences | 8 [☆] Doctoral Programs in Biomedical Sciences | Experimental Pathology (KATO Mitsuyasu) Sub-Supervisor (Fill in, in case you are applicant of Cooperative Graduate School System or wrote specific supervisor above) | |
| Language Used in the Exam | | 1. Japanese 2. English | Choose a language to use in the exam and circle it. |

| | | | |
|---------------|--------------------------|--|--|
| Exam Subjects | Written Examination | Oral Examination | |
| | Foreign Language English | Individual Interview Applicants will be questioned about their research conducted during the master's program and related general knowledge. Applicants who completed a course in medicine or dentistry, or a 6-year course in veterinary medicine will be interviewed about their specialized field. | |

| | | | | | | | | | | |
|-------------|----------|---|------------------------------|----------------------------|---------------------------|-------------------------------------|-------------------------|-------|---|-------|
| Eligibility | National | 1 | University | University of ○○ | ※ | Expect to Graduate | Graduated | Other | Year and Month of (Expected) Graduation | |
| | Public | 2 | | | | | | | Year (Gregorian calendar) | Month |
| | Private | 3 | School/ Faculty | Faculty of Medicine | | 1 | 2 | 5 | ○○○○ 3 | |
| | Foreign | 4 | College/ Department | Department of △△ | | | | | | |
| | Other | 5 | | | | | | | | |
| | National | 1 | University (Graduate School) | | ※ | Expected to acquire Master's degree | Acquire Master's degree | Other | Year and Month of (Expected) Completion | |
| | Public | 2 | | | Year (Gregorian calendar) | | | | Month | |
| | Private | 3 | Graduate School | | | 3 | 4 | 5 | | |
| | Foreign | 4 | | | | | | | | |
| | Other | 5 | Program | | | | | | | |

Note: Foreign students must acquire the residence status of "Student" before the enrollment procedure.

| | |
|------------------------|---|
| Applicable Eligibility | ※ |
|------------------------|---|

Required

<Attachment>

Attach the "Receipt of examination fee" or "Certificate of postal transfer payment" here using glue.

(外国人出願者用)
(for foreign applicants)

履 歴 書
Curriculum Vitae

Entry Example

| 氏 名 | フリガナ | | | | 生 年 月 日 Date of Birth | 1900年0月0日 | 年 齢 Age | 00 | 国 籍 Nationality | 000 | 在留資格 Resident Status | College Student |
|--|---|---|---|--|-----------------------------------|---------------------------------|---|----|--------------------|-----|-------------------------|-----------------|
| | ローマ字 | 0000 | 0000 | | | | | | | | | |
| Family name First Name Middle Name | | | | | | | | | | | | |
| 学 校 教 育 Education | 学 校 名 ・ 所 在 地 Name and Address of School | | 正 規 の 修 学 年 数 Officially Required Number of Years of Schooling | 入 学 及 び 卒 業 年 月 Year and Month of Entrance and Completion | 修 業 年 数 Period of Schooling | 専 攻 科 目 Major Subject if any | 学 位 ・ 資 格 Diploma or Degree Awarded | | | | | |
| 初 等 教 育 Elementary Education 小 学 校 Elementary School | 学校名 Name | 0000 elementary school | 6 | 入学 0000.4 from 卒業 0000.3 To | 6 | | | | | | | |
| 中 等 教 育 Secondary Education 中 学 及 び 高 校 Secondary School | 中学 Lower | 学校名 0000 lower secondary school 所在地 000000000000 | 3 | 入学 0000.4 from 卒業 0000.3 To | 3 | | | | | | | |
| | 高校 Upper | 学校名 000 Upper secondary school 所在地 000000000000 | 3 | 入学 0000.4 from 卒業 0000.3 To | 3 | | | | | | | |
| 高 等 教 育 Higher Education 大 学 Undergraduate Level | 学校名 Name | 000 University of 000 | 4 | 入学 0000.4 from 卒業 0000.3 To | 6 | 000000 | 000 | | | | | |
| 高 等 教 育 Higher Education 大 学 院 Graduate Level | 学校名 Name | 000 University of 000 | 2 | 入学 0000.4 from 卒業 0000.3 to | 2 | 000000 | 000 | | | | | |
| 以上を通算した全学校教育就学年数 Total Number of Years of Schooling as given Above | | | 18 | TOTAL | 20 | | | | | | | |
| 休学等、在籍中に修学を中断した期間 (理由) Periods of interruption of studies, if any from 年 yr., 月 mon. ~ to 年 yr., 月 mon. () | | | | | | | | | | | | |

| 研 究 歴 Research Activities (研究生の 経歴を含 む。) | 研 究 機 関 名 Name of Research Institution | 所 在 地 Address | 身 分 Status | 研 究 期 間 Duration of Research | 年 数 yrs |
|---|---|--|------------------|---------------------------------|------------|
| | University of Tsukuba | 1-1-1 Tennodai, Tsukuba, Ibaraki, 305-8577 Japan | Research student | 0000.4 ~ 0000.3 | 1 |
| | | | | ~ | |
| | | | | ~ | |

※
This field should be left blank.
※

記入は、日本語又はローマ字体を用いてください。 Please type or print in Japanese or English

Entry Example

| |
|------------------------------------|
| Examinee Number |
| ※ This field should be left blank. |

Employment Record

(University of Tsukuba Graduate School)

| | | | |
|-------------------------|--|--|---|
| Name (Date of Birth) | TSUKUBA Taro (Y ○○○○M ○ D ○) | Graduate School Program Course/ Field | Graduate School of Comprehensive Human Sciences Program: Doctoral Programs in Biomedical Sciences Course/ <u>Field</u> : Experimental Pathology |
|-------------------------|--|--|---|

If you have any employment history, describe all of your previous and current jobs including job titles, responsibilities, and research content.
If you need more space to write, make a photocopy of this form.

| | |
|--|--|
| Employment Period | Year ○○○○ Month 4 – Year ○○○○ Month 10 |
| Company/Organization | ○○○○ Corporation <u>Full-time</u> Part-time |
| Job Title/ Responsibilities/ Research Content | |
| ○○○ Second Engineering Division Staff Responsible for ○○○ area and management of ○○○ Conduct tests of ○○○ and research, statistics, and analysis of ○○○ | |
| Employment Period | Year ○○○○ Month 11 – Year ○○○○ Month 3 |
| Company/Organization | ○○○ Center, ○○○○ Research Institute <u>Full-time</u> <u>Part-time</u> |
| Job Title/ Responsibilities/ Research Content | |
| Assist research of ○○○○ in measuring ○○○ and analyzing ○○○ | |
| Employment Period | Year Month – Year Month |
| Company/Organization | Full-time Part-time |
| Job Title/ Responsibilities/ Research Content | |
| | |

Entry Example

(February 2018)

University of Tsukuba
Graduate School
Reference Card

| | | |
|--|---|-----------------|
| Examinee Number | ※ This field should be left blank. | |
| Name | TSUKUBA Taro | |
| Program | Doctoral Programs (four-year) | Course |
| | Graduate School of Comprehensive Human Sciences | Graduate School |
| | Biomedical Sciences | Program |
| Exam Type | ①. General Admission ②. Working Individuals | |
| Language Used in the Exam | ①. Japanese ②. English | |
| Exam Subjects | | |
| Written | Oral | |
| English | Individual Interview | |
| Photo (4 x 3cm) Headshot with no hats, taken within the last three months (Attach identical photographs.) | | |

Cut here

(February 2018)

Photo Card

| | | |
|--|---|-----------------|
| Examinee Number | ※ This field should be left blank. | |
| Name | TSUKUBA Taro | |
| Program | Doctoral Programs (four-year) | Course |
| | Graduate School of Comprehensive Human Sciences | Graduate School |
| | Biomedical Sciences | Program |
| Exam Type | ①. General Admission ②. Working Individuals | |
| Language Used in the Exam | ①. Japanese ②. English | |
| Exam Subjects | | |
| Written | Oral | |
| English | Individual Interview | |
| Photo (4 x 3cm) Headshot with no hats, taken within the last three months (Attach identical photographs.) | | |

Cut here

(February 2018)

Desktop
Reference Card

| | | |
|-----------------|---|-----------------|
| Examinee Number | ※ This field should be left blank. | |
| Name | TSUKUBA Taro | |
| Program | Doctoral Programs (four-year) | Course |
| | Graduate School of Comprehensive Human Sciences | Graduate School |
| | Biomedical Sciences | Program |
| Exam Type | ①. General Admission ②. Working Individuals | |

Cut here

Biomedical Sciences
or
Clinical Sciences

<Guidelines for the Completion>

- Attach photographs and fill in your name and program.
- For the "Exam Type," circle 1 or 2 that applies.
- For the "Language Used in the Exam," circle 1 if you wish to take an interview and receive examination questions and answers in Japanese. Circle 2 if you wish to take an examination
- Cut out along the lines.

Acceptance Card

| | | | |
|------------------------------------|------------------------------------|---|---|
| Examinee Number | ※ This field should be left blank. | | |
| Date of Birth (Gregorian calendar) | 0000 | Y | |
| | | M | |
| | | | D |
| Sex | (M) | F | |
| Name | TSUKUBA Taro | | |

研究歴証明書

Certificate of Research Activities

国籍 (Nationality) : ○○○○

氏名 (Name) : ○○○○

生年月日 (Date of Birth) : (Day) (Month) (Year)

上記の者は、下記のとおり研究歴を有することを証明する。

This is to certify that the above person engaged in the research activities as follows.

記

| | |
|--|--|
| 在籍した機関、部局名及び身分 (Status and Institution Attended) | |
| 研究期間 (Duration of Research) | 年 月 日から 年 月 日まで (年 か月間) From : _____ to : _____ = _____ (Day) (Month) (Year) (Day) (Month) (Year) (Years) (Months) |
| 研究題目及び研究内容 (Title and Outline of Research) | <p>Foreign applicants who have completed a university education in a country which has a less than 18 years of school education curriculum up to the level of university graduation, and have or will have conducted research for a sufficient period of time (generally one year or more) as a research student or researcher at a university, inter-university research institute, or other similar research institutes inside or outside Japan, and also will be 24 years of age or older must submit this certificate authorized by the director of their institute. Foreign students who have enrolled in the University of Tsukuba Graduate School as a research student may submit a Certificate of Enrollment (for scholarship application) designated by the University as a substitute for this certificate.</p> |
| 指導教員 職・氏名 (Name and Position of Academic Advisor) | |

年月日 (Date) : _____

署名 (Signature) : _____

氏名 (Name) : _____

職名 (注) (Title*) : _____ 印

機関名 (Institution) : _____

所在地 (Address of Institution) : _____

(注) 証明者は、機関の長等 (例えば、学長又は学部長等) とします。

(*The title of the certifier should be equivalent to representative of organization such as President, Dean, Director, etc)

宛名シート①

Address Sheet #1

- 欄は記入しないでください。
The fields marked with ※ should be left blank.
- このシートは「合格通知書」及び「入学手続書類」を送付する場合のあて名として使用しますので、郵便を受け取ることができる住所・氏名を楷書でていねいに記入してください。
The address sheets will be used to send out acceptance letters and enrollment documents to the successful applicants. Enter the mailing address and name clearly in block letters.
- 志願者以外の住所・氏名を記入する場合は、 に志願者の氏名を記入してください。
If you enter the address and name of a person other than yourself (the applicant), enter your name in the box .

| | |
|-------------------------|--|
| 志望 Program | 医学を履修する課程 Doctoral Programs (four-year) |
| | 人間総合科学研究科 Graduate School of Comprehensive Human Sciences |
| | 生命システム医学専攻 Program: Doctoral Programs in Biomedical Sciences |
| 氏名 Name | 筑波太郎 TSUKUBA Taro |
| 受験番号 Examinee Number | ※この欄は記入不要です。 This field should be left blank. |

住所、氏名を記入する

Write the mailing address and name here.

殿

※この欄は記入不要です。
This field should be left blank.

住所、氏名を記入する

Write the mailing address and name here.

殿

※この欄は記入不要です。
This field should be left blank.

(2月期・一般/社会人)

| | | | | | | | | |
|---|-------|-----------|---|---|---|---|---|---------|
| ※ | 国 | 費 | 私 | 費 | ※ | 郵 | 外 | 受 験 番 号 |
| | 有 職 者 | 連 携 大 学 院 | | | | | | ※ |

University of Tsukuba Graduate Admissions 2018 List of Documents to be Submitted

| | | | | | |
|-----------------|---|---------|--|------|---------------------|
| Graduate School | Graduate School of Comprehensive Human Sciences | Program | Program: Doctoral Programs in Biomedical Sciences | Name | TSUKUBA Taro |
|-----------------|---|---------|--|------|---------------------|

Note: Make sure to mark "○" in the "Check" columns for documents to be submitted. Your application may not be accepted unless all the required documents are submitted.

| Documents | Check | Required for | Remarks |
|--|-------|--|---|
| [University of Tsukuba designated forms] | | | |
| Application Form | ○ | All applicants | |
| Curriculum Vitae for Foreign Applicants | ○ | All foreign applicants | |
| Employment Record | ○ | All applicants who have employment history | |
| Reference Card/ Photo Card/ Desktop Reference Card/ Acceptance Card | ○ | All applicants | These fields should be left blank. |
| Research Plan | ○ | All applicants | |
| Research/ Specialty Report | ○ | All applicants | |
| Certificate of Research Activities | | Foreign applicants who are required | |
| Address Sheet #1 | ○ | All applicants | To be used to send out acceptance letters and other documents from the University of Tsukuba |
| List of Documents to be Submitted | ○ | All applicants | |
| Address Sheet #2 | ○ | All applicants | To be used to submit the application documents |
| Examination Fee ("Certificate of postal transfer payment" or "Receipt of examination fee" of 30,000 yen) | ○ | All applicants (Except Government-sponsored foreign students) | Attach to the specified column of the Application Form. |
| [Certificates and other documents to be prepared by applicants] | | | |
| (Expected) Completion Certificate | ○ | All applicants | |
| Degree Certificate | ○ | <ul style="list-style-type: none"> Applicants who graduated from (completed) a foreign university Applicants who obtain a qualification for application from the National Institution for Academic Degrees and University Evaluation | |
| Academic Transcript | ○ | All applicants | |
| Letter of Approval for Taking the Entrance Examination (Format of your choice) | | Applicants who currently attend a university or graduate school Applicants who currently work for a government agency, school, or company | Except those who will graduate or complete in March 2018 Except part-time workers A4 size |
| Certificate of Government-Sponsored Foreign Student | | Foreign applicants who are required | |
| Reply Envelope (with a 362 yen postage stamp attached) | ○ | All applicants | To be used to send out reference cards from the University of Tsukuba |

| | | | | | | | |
|------|---|---|---|-----|---|-----|---|
| 受付月日 | ※ | 月 | 日 | 受付者 | ※ | 点検者 | ※ |
|------|---|---|---|-----|---|-----|---|

The fields marked with ※ should be left blank.

Entry Example

速 達

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郵便局で
書留速達
便にする
こと

書留速達（出願書類在中）

教育推進課
御中

Japan
茨城県つくば市天王台一―一―一
筑波大学教育推進部

| | |
|-----------------|---|
| Graduate School | Doctoral Programs (four-year) in Graduate School of Comprehensive Human Sciences Program: Doctoral Programs in Biomedical Sciences Course: ○○○ |
| Name | TSUKUBA Taro |
| Address | ○○○ Apartment B-305, 5-3 Amakubo, Tsukuba-city, Ibaraki-ken ○○○-○○○○ |

Note 1: Fill in the same information as on the Application Form.

Note 2: Attach this Address Sheet to a K2 size envelope and submit by mail or by hand.