

Confirmation Form

Date (yyyy/mm/dd): _____

To the President of University of Tsukuba

Graduate Schools and Programs to which application is being made.

Graduate School: _____

Program: _____

Applicant's Name: _____

Signature: _____

Regarding your university's organizational restructuring plan of graduate schools and programs scheduled in April, 2020, I hereby confirm that I have read the “改組再編の資料 (organizational restructuring plan)” published on your university's website and I will belong to a new degree program which succeeds the graduate school and program written above (for which I will take an entrance examination) upon being admitted if new organizations get chartered.

Application Form

Doctoral Programs

August

Fill in or circle the following items.

The fields marked with ※ should be left blank.

Examinee
Number

※

Application Method①	General Admission	①	Working Individuals	2	Transfer Admission	3	Application Method②	Cooperative Graduate	1	Research Institute Code	※		Enrollment 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	Nationality		

Name					Sex	Date of Birth (Gregorian calendar)/ Age				
					M	F				
					1	2	Y	M	D	Age

Present Address				
	[Phone ()] [Cell Phone ()]			
	[E-mail address :]			

Reference (Inside Japan)	Name				Relation-ship	
	Address				[Phone ()]	

Graduate School Name/ Code		Program Name/ Code		Supervisor	
Graduate School of Comprehensive Human Sciences		8	Doctoral Program in Nursing Science	J	
Language Used in the Exam				1. Japanese 2. English	
Exam Subjects	Written Examination			Oral Examination	
	Foreign Language		Specialized subject	Individual Interview	
	English		Basic subject related to Nursing.	Applicants will be questioned about their research conducted during the master's program and related general knowledge.	

Eligibility	National	1	University		Expect to Graduate	Graduated	Other	Year and Month of (Expected) Graduation	
	Public	2						Year	Month
	Private	3	School/ Faculty					(Gregorian calendar)	
	Foreign	4	College/ Department						
	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	Month
	Private	3	Graduate School					(Gregorian calendar)	
	Foreign	4							
	Other	5	Program						

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

Applicable
Eligibility

※

<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

氏 名	フリガナ		男 (M) ・ 女 (F) Sex	生 年 月 日 Date of Birth	19 年 月 日	年 齢 Age		国 籍 Nationality		在 留 資 格 Resident Status	
	ローマ字										
	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 Enrollment 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 所在地 Location		年 yrs	入学 from 卒業 to	年 yrs					
中 等 教 育 Secondary Education 中学及び高校 Secondary School		中学 Middle School	学校名 Name 所在地 Location	年 yrs	入学 from 卒業 to	年 yrs					
		高校 High School	学校名 Name 所在地 Location	年 yrs	入学 from 卒業 to	年 yrs					
高 等 教 育 Higher Education 大 学 Undergraduate Level		学校名 Name 所在地 Location		年 yrs	入学 from 卒業 to	年 yrs					
高 等 教 育 Higher Education 大 学 院 Graduate Level		学校名 Name 所在地 Location		年 yrs	入学 from 卒業 to	年 yrs					
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				年 yrs	TOTAL	年 yrs					
休学等、在籍中に修学を中断した期間（理由） from 年 yr., 月 mon. ~ to 年 yr., 月 mon. (Periods of interruption of studies, if any)											

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
				~	
				~	
				~	

※
添 付 印

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

Examinee Number
※

Employment Record

(University of Tsukuba Graduate School)

Name (Date of Birth)	(Y M D)	Graduate School Program Course/ Field	Graduate School of Comprehensive Human Sciences Program: Doctoral Program in Nursing Science Course/ Field:
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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 – Year Month
Company/ Organization	Full-time Part-time
Job Title/ Responsibilities/ Research Content	
Employment Period	Year Month – Year Month
Company/ Organization	Full-time Part-time
Job Title/ Responsibilities/ Research Content	
Employment Period	Year Month – Year Month
Company/ Organization	Full-time Part-time
Job Title/ Responsibilities/ Research Content	

(August 2020)
University of Tsukuba
Graduate School
Examination Card

Examinee Number	※	
Name		
Program	Doctoral Programs	Course
	Graduate School of Comprehensive Human Sciences	Graduate School
	Doctoral Program in Nursing Science	Program
Language Used in the Exam	1. Japanese 2. English	
Exam Subjects		
Written		Oral
English	Specialized subject	Individual Interview
<div>Photo</div> <div>(4 x 3cm)</div> <div>Headshot with no hats, taken within the last three months</div> <div>(Attach identical photographs.)</div>		

(August 2020)
Photo Card

Examinee Number	※	
Name		
Program	Doctoral Programs	Course
	Graduate School of Comprehensive Human Sciences	Graduate School
	Doctoral Program in Nursing Science	Program
Language Used in the Exam	1. Japanese 2. English	
Exam Subjects		
Written		Oral
English	Specialized subject	Individual Interview
<div>Photo</div> <div>(4 x 3cm)</div> <div>Headshot with no hats, taken within the last three months</div> <div>(Attach identical photographs.)</div>		

(August 2020)
Desktop Examination Card

Examinee Number	※	
Name		
Program	Doctoral Programs	Course
	Graduate School of Comprehensive Human Sciences	Graduate School
	Doctoral Program in Nursing Science	Program

<Guidelines for the Completion>

- Attach photographs and fill in your name and program.
- 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

Sex	M F		
Date of Birth (Gregorian calendar)	Y	M	D
Name			
Examinee Number	※		

研 究 計 画 書

Research Plan

受 験 番 号

※

筑波大学大学院人間総合科学研究科 University of Tsukuba Graduate School of Comprehensive Human Sciences
博士後期課程看護科学専攻 Doctoral Program in Nursing Science

記入上の注意など Guidelines

- ① 選考の際の重要な資料にします。できるだけ具体的に書いてください。The research plan serves as an important reference for selecting applicants for admission. Describe your plan as specifically as possible.
- ② 簡潔にまとめ、スペース内に収まるよう記入してください。Summarize your plan briefly to fill in the blank.

Name		Graduate School Program	Graduate School of Comprehensive Human Sciences Doctoral Program in Nursing Science	Supervisor	
I. 研究したい課題 Research theme					
II. 目的・内容（明らかにしたい事柄を具体的に） Objective and content of the research (Specify what you want to reveal.)					
III. 計画・方法（できるだけ箇条書きに） Plan and method (List in bullet point format, if possible.)					
IV. 研究の特色（独創的ところや意義など） Features of the research (Originality and significance of the research)					
V. これまでの活動との関連（志望理由を含める。） Relevance with your previous research activities (Include your motivation for application.)					

※欄は記入しないでください。The fields marked with ※ should be left blank.

(8月期)

受験番号

※

University of Tsukuba Graduate Admissions 2020

Thesis Title Sheet

(Doctoral Programs)

フリガナ		Graduate School	Graduate School of Comprehensive Human Sciences
Name		/Program Name	Doctoral Program in Nursing Science ()Field
Types of Thesis	①	<input type="checkbox"/> Master's thesis <input type="checkbox"/> Copy of master's thesis <input type="checkbox"/> A dissertation equivalent to master's thesis	
	②	<input type="checkbox"/> New thesis <input type="checkbox"/> Copy of new thesis	
	③	<input type="checkbox"/> A dissertation equivalent to master's thesis	
	④	<input type="checkbox"/> Graduation thesis <input type="checkbox"/> Copy of Graduation thesis <input type="checkbox"/> A dissertation similar to a graduation thesis	
Thesis title			

(Note)

1. Please do not fill in the ※ column.
2. Please check the boxes of the type of thesis, etc. in the corresponding column.
3. Please attach it to the cover of all articles to be submitted. (This paper can be copied)

(August)

University of Tsukuba Graduate Admissions
[Address Sheet for Thesis Submission]

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※郵送の場合、郵便局に
〒は郵便局に
送ることを
必ず守る

※ In the case of mailing

書 留 (論文等在中)

看護科学専攻事務室
御中

JAPAN
茨城県つくば市天王台一―一―一
筑波大学人間総合科学研究科

フリガナ	受験番号		※	Doctoral Programs
Name	Graduate School Name/ Program Name	Graduate School of Comprehensive Human Sciences	Doctoral Program in Nursing Science ()Field	
Types of Thesis	①	<input type="checkbox"/> Master's thesis <input type="checkbox"/> Copy of master's thesis	<input type="checkbox"/> A dissertation equivalent to master's thesis	
	②	<input type="checkbox"/> New thesis <input type="checkbox"/> Copy of new thesis		
	③	<input type="checkbox"/> A dissertation equivalent to master's thesis		
	④	<input type="checkbox"/> Graduation thesis <input type="checkbox"/> Copy of Graduation thesis	<input type="checkbox"/> A dissertation similar to a graduation thesis	

(Note)

1. Please do not fill in the ※ column.
2. Please attach this sheet to an envelope that contains the thesis to be submitted.
3. Please check the boxes of the type of thesis, etc. in the corresponding column.

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. Write 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	博 士 後 期 課 程 Doctoral Programs
	人 間 総 合 科 学 研 究 科 Graduate School of Comprehensive Human Sciences
	看 護 科 学 専 攻 Doctoral Program in Nursing Science Program:
氏 名 Name	
受 験 番 号 Examinee Number	※

〔※〕 殿

〔※〕 殿

(8 月期)

※	国	費	私	費
	有	職	者	連携大学院

※	郵	外
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受 験 番 号
※

University of Tsukuba Graduate Admissions 2020 List of Documents to be Submitted

Graduate School	Graduate School of Comprehensive Human Sciences	Program	Doctoral Program in Nursing Science	Name	
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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]			
Confirmation Form		All applicants	
Application Form		All applicants	
Curriculum Vitae for Foreign Applicants		All foreign applicants	
Employment Record		All applicants who have employment history	
Examination Card/ Photo Card/ Desktop Examination Card/ Acceptance Card		All applicants	
Research Plan		All applicants	
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		Applicants who graduated from a foreign university	
Academic Transcript		All applicants	
Letter of Approval for Taking the Entrance Examination (Free Format)		Applicants who currently study at university or graduate school Applicants who currently work for a government agency, school, or company	Except those who will graduate or complete in March 2020 Except part-time workers A4 size
Certificate of Government-Sponsored Foreign Student		Foreign applicants who are required	
Envelope (with a 362 yen postage stamp attached)		All applicants	To be used to send out reference cards from the University of Tsukuba
Thesis, etc.			
Thesis Title Sheet		All applicants (Excluding those who are expected to complete master program of Nursing Science.)	Attach it to the front page of each thesis or paper to be submitted.
Thesis		All applicants (Excluding those who are expected to complete master program of Nursing Science.)	Submit one copy of one of ① to ④ of "Thesis" of Documents to be Submitted etc.
Address Sheet for Thesis Submission		All applicants (Excluding those who are expected to complete master program of Nursing Science.)	Attach it to an envelope for submitting your thesis or paper.

受付月日	※	月	日	受 付 者	※	点 検 者	※
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The fields marked with ※ should be left blank.

速 達

3 0 5 — 8 5 7 7

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

筑波大学教育推進部

茨城県つくば市天王台一―一―一

Japan

Graduate School	Doctoral Programs (four-year) in Graduate School of Comprehensive Human Sciences Doctoral Program in Nursing Science
Name	
Address	

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.