1.Name: (write exactly same as it appears on your passport)

KUMAMOTO GAKUEN UNIVERSITY

INTERNATIONAL EXCHANGE APPLICATION



Please attach a recent

photograph of yourself.

Write your name on the

back of the photo.

 last (family or surname) first (given) middle or maiden

Name in *katakana*:

last (family or surname) first (given) middle or maiden

2. Sex: ⬜ male ⬜ female 3. Nationality:

4. Date of Birth: / / 5. Place of Birth:

 mo. day yr. city state or country

6. Home town/city:

 town/city state or country

7. Marital Status: ⬜ Married ⬜ Single

8. Home Institution:

1. Highest degree completed or in progress at HOME institution:

Enrolled Faculty/College/School:

Enrolled Department: 　　 Scholastic Year: 1, 2, 3, 4

 \* circle the appropriate number.

 Major field:

Minor field:

10. Date of graduation or expected graduation from your HOME institution: / /

　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　 　mo. day yr.

11. Check the period of enrollment in KGU for which you are applying:

 ⬜ one semester ⬜ one year starting (April, September), 20

12. Present Address: (valid until /

Please write your address as it would appear on an envelope, using one line for each line of your address.

 telephone (with area prefix)

 E-mail address

13. Permanent Address: (mail will be sent here after the date given above)

 telephone (with area prefix)

 E-mail address

14. The following information is necessary for immigration procedures:

1. Information on your passport, if currently possessed:

 (1) Number: (2) Date of Expiration: / /

 　　　 mo. day yr.

b) Intended Date of Entry: / / c) Intended Port of Entry:

 mo. day yr.

d) Intended Length of Stay: e) Accompanying person, if any: ⬜ Yes ⬜ No

f) Place to Apply for Visa:

g) Past Entry into/Stay in Japan: ⬜ Yes time(s) / ⬜ No

　　If yes, the latest entry: from / / to / /

 mo. day yr. mo. day yr.

h) Criminal record (in Japan or overseas): ⬜ Yes Details: /　⬜ No

i) Are any of your family members (Father, Mother, Spouse, Son, Daughter) currently resident in Japan? ⬜ Yes ⬜ No

If yes, please fill out the following columns.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Relation-ship | Name | Date of Birth | Nationality | Residing with applicant or not | Place of employment/school | Status of Residence |
|  |  |  |  | Yes / No |  |  |

j)Educational Background

How many years of education have you had commencing with an Elementary School?

 years

Please fill out the following columns to verify your above answer:

(Begin with an elementary school and include your current home institution, college or university.)

|  |  |  |
| --- | --- | --- |
| Name of the school you attended | Entered (month / year) | Left (month / year) |
|  |  **/** |  **/** |
|  |  **/** |  **/** |
|  |  **/** |  **/** |
|  |  **/** |  **/** |
|  |  **/** |  **/** |
|  |  **/** |  **/** |

 **Name for Registration (Print or Type)**

**Instructions:**

KGU Student Identification Card does not have enough space to include full name if you have the middle names. Therefore, as a rule, KGU Registrar’s Office asks you to choose two parts of your name for the registration to KGU. You’re supposed to use the First and Last name as they appear in your passport. But if your name is short enough and/or all the part of names are considered as one name such as in Myanmar, we will include your middle name. In that case, please write down your request underneath.

KGU Student Identification Card could print your name only in Japanese, and for your English name, KATAKANA would be used. Thus, please write down your name in KATAKANA as well.

In the case you’re Chinese or Korean and have *official* kanji name, we could register and print your name in kanji instead of KATAKANA. Therefore, please write down your name in kanji in addition to KATAKANA only if you have *official* ones.

**Name for Registration:**

In English:

 LAST FIRST

In KATAKANA:

 LAST FIRST

In Kanji:

 LAST FIRST

* If you would like to include your middle name, please write down your name in the way you would like to register both in English and Japanese. Thank you.

### Study Plan at KGU

**Your Name:**

**Instructions:**

Besides Mandatory Japanese Courses and Seminar in Japanese Culture, which courses would you like to take during the Spring Semester and/or the Fall Semester? Please read the Notes in the next page, and refer to our university’s web site:

http://www.kumagaku.ac.jp/english/campus\_life/courses

and ***write down the courses you’re interested in taking***. ***This form will be used to accept you to an appropriate department.*** It’s not a pre-registration form, thus, you could change the courses to take after your arrival, if it’s necessary.

Fall Semester (Starting in September):

Spring Semester (Starting in April):

Any other courses you’d like to take in Japanese, if any:

1. **Courses for Exchange Students**

You will be assigned to a specific department, which will be determined by the courses of your choice, but you are allowed to take any courses from any of our other departments.

KGU offers the Japanese language courses designed especially for exchange students who have limited skill in Japanese. In each semester, you must attend 4 Japanese classes a week if your level of Japanese language proficiency is not high enough to take Japanese classes of higher level and other regular courses taught in Japanese.

Besides the mandatory Japanese language courses and Seminar in Japanese Culture, KGU offers the following courses taught in English or in English and Japanese bilingually, in the following departments:

International Communication Seminar I・II

Hospitality Seminar I･II・III Department of Hospitality Management

Semester Seminar V･VI

Seminar III (Japanese Culture and Society) Department of Economics

Seminar I (World Englishes I) Department of English

1. **Photos**

**The three photos you enclose** besides the one you attach to the application form would be used for your KGU Student ID Card, your Certificate of Eligibility application, and the KGU International Student Card.

If you have any further questions, please feel free to ask Ms. Tsunoda at the email address: a-saito@kumagaku.ac.jp

Akane Tsunoda (Ms.), Program Coordinator, Office of International Education

 **Financial Questionnaire**

*\*****The following information is necessary for your certificate of eligibility application*** *and will be also used for JASSO Scholarship recipient selection, so please make sure to fill in fully.*

Name in print:

 Last name First name Middle name

1. Are you receiving any financial aid or loan at your home institution? ⬜ Yes ⬜ No

If “Yes”, please specify the total amount: ()

Is it transferable from your home institution to KGU? ⬜ Yes ⬜ No

If “Yes”, are there any requirements over your course registration at KGU?

 ⬜ Yes ⬜ No

If “Yes”, what are they?

2. Who is going to finance your stay in Japan?

(1) Method of support and an **amount of support per month** (average) *in Japanese yen*

 ⬜ Self ( yen) ⬜ Remittance from outside Japan ( yen)

⬜ Carrying from abroad ( yen) (Who When )

⬜ Guarantor ( yen) ⬜ Scholarship ( yen) ⬜ Others ( yen)

 in Japan

(2) If you have any Supporter other than yourself, please fill out the following:

Name Relationship

Address Phone

Occupation (Name of employment) Phone

Annual income yen

3. In case that your answer in the question 2 (1) is scholarship, which of the following is your scholarship agency? Please write down the name of your scholarship agency in parentheses.

⬜ Japanese government

⬜ Foreign government

⬜ Public service corporation ( )

⬜ Local self-governing body ( )

⬜ Others ( )

 **Medical History**

 Health Insurance

Name of insured: Insurance Co.

Policy number: Phone number:

 Personal History

Height: cm 　　 Weight: kg 　Blood type (If known):

Blood pressure: /

Have you ever had or do you now have any on the following: (please tick in box)

⬜ anemia ⬜ broken bones ⬜ alcohol / drug abuse

⬜ asthma ⬜ sexually transmitted disease ⬜ rheumatic fever

⬜ high blood pressure ⬜ headaches ⬜ eye problem

⬜ emotional / mental disorder ⬜ convulsions / seizures ⬜ back problem

⬜ recent weight change ⬜ tuberculosis ⬜ stomach trouble

⬜ arthritis ⬜ hepatitis / liver problems ⬜ female disorders

⬜ scarlet fever ⬜ diabetes ⬜ cancer / tumors

⬜ fainting / dizzy spells ⬜ disability / permanent ⬜ thyroid disease

⬜ heart murmur / problems ⬜ dental problems ⬜ urinary problems

⬜ hereditary disorder ⬜ others (specify if any)

Comments on any of the above:

Have you had any major surgery? ⬜ Yes \*specify ⬜ No

Are you presently being treated for any medical condition?

 ⬜ Yes \*diagnosis ⬜ No

Current medications:

 Allergy History

Medication: ⬜ Yes \*specify: ⬜ No

Insects: ⬜ Yes \*specify: ⬜ No

Food: ⬜ Yes \*specify: ⬜ No

Inhalants: ⬜ Yes \*specify: ⬜ No

(i.e. pollen)

 Next of kin or person to notify in case of emergency

Name: Relation to applicant:

Telephone number (with area prefix):

Mobile phone number:

FAX number (with area prefix):

E-mail address:

 **Housing Questionnaire**

**Instructions:**

We are asking the questions in order to help place you with a compatible roommate. Therefore, please be accurate and specific. Please understand, however, that we may not be able to accommodate all of your requests due to various constraints.

氏名Name: ⬜ 男Male ⬜ 女Female

## 質問Questions

1. Do you smoke?　 タバコを吸いますか

 ⬜ Yes ⬜ No

1. Are you allergic to smoke, or have any objection to living with someone who smokes?

あなたはタバコにアレルギーがありますか、または喫煙者と同室になることが嫌ですか？

 ⬜ Yes, I’m allergic. ⬜ Yes, I have objection. ⬜ No

1. Do you consider yourself neat and organized?　あなたは整理整頓が上手ですか？

 ⬜ Yes, very much ⬜ Yes, somewhat ⬜ Not really ⬜ Not at all

1. Do you consider yourself a day person or a night person?　昼型ですか、夜型ですか？

 ⬜ Day person ⬜ Night person

1. Please state two or three personal characteristics which describe yourself.

あなた自身について書いてください。

1. What type of persons do you think you can best get along with?

どんな人とうまくやっていけますか？

1. Are you vegetarian, or do you have any restrictions in food?　食物に制限がありますか？

 ⬜ Yes ⬜ No

 If yes, please describe.　それは何ですか？

# 健康状態Health

State your general health: 一般的に

Indicate any physical handicap you may have.　身体的なハンディキャップ

List health problems, serious allergies and/or current medication, if any.

健康上の問題、アレルギー等や現在治療中（投薬を受けている）病気など