### NUPACE APPLICATION CHECKLIST

| NB. A | ll applicants are required to register at: http://nupace.iee.nagoya-u.ac.jp/en/apply/regist.html                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|       | Have you registered at http://nupace.iee.nagoya-u.ac.jp/en/apply/regist.html?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Pleas | e ensure that the following documents are enclosed in your application:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|       | NUPACE Application Form Contract Study Plan/Description of Academic Interests ( <u>typed</u> on a separate sheet of A4-sized paper. Refer to Q.16 of NUPACE Application Form'.) Official Transcript of Academic Records (to be issued <u>in English</u> by 1) the institution presently being                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|       | attended, and 2) for transfer students, previous institutions of higher education attended). NB. Graduate students should submit academic records for both undergraduate and graduate studies. Official Certificate of Enrolment as a Student (to be issued in English by the institution presently being attended) Confidential Reference Form (to be written by a faculty member in an academic field related to the applicant's 'major')                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|       | Language Proficiency Form & Supporting Documents (i.e., <u>TOEFL</u> , <u>IELTS</u> , <u>TOEIC</u> , <u>CEFR</u> , <u>CET-6</u> and/or Japanese Language Proficiency Test < <u>JLPT</u> > score sheets)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|       | Health Certificate Personal Data Sheet Copy of the information page of the student's passport, where available Four identical professionally-printed photographs (3.5 cm x 4.5 cm), signed on the reverse side, one of which should be attached to the 'NUPACE Application Form' Statement of Bank Account Balance or Scholarship (This requirement applies to those students who wish to participate in NUPACE even if their application for a Student Exchange Support Program scholarship is unsuccessful <see 'nupace="" application="" form'="" of="" q.15="">. Students applying for a one-semester exchange should enclose a bank balance or scholarship certificate verifying that they have funds equivalent to JPY500,000; students applying for a one-year exchange need to verify that they have JPY1,000,000. The bank account may be held in the name of the applicant, or a close family member.)</see> |

#### **Application Deadlines:**

Completed application materials <u>must reach the NUPACE Office</u> by the following dates:

Late September Admission 2015: Sunday, 15 March 2015 Early April Admission 2016: Sunday, 1 November 2015

#### **Application Forwarding Method:**

- 1. Applications processed through international offices of our partner institutions may, with the exception of photographs (see above), be sent as PDFs to <a href="mailto:nupace@iee.nagoya-n.ac.ip">nupace@iee.nagoya-n.ac.ip</a>.
- 2. Students, nominated by partner institutions, who are individually responsible for sending their applications to NUPACE, should despatch the original documentation to:

NUPACE Office International Education and Exchange Center Nagoya University Furo-cho, Chikusa-ku 464-8601 JAPAN

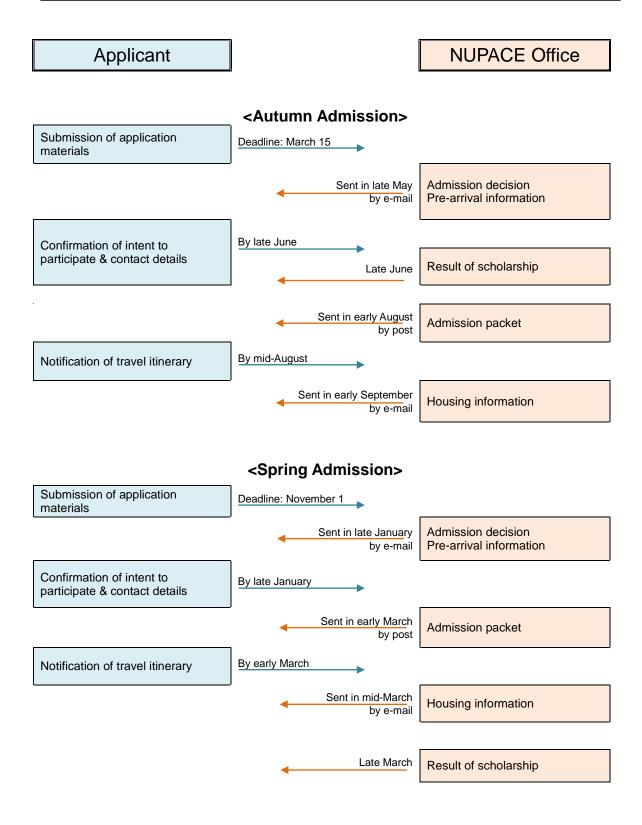
#### **Enquiries:**

E-mail: nupace@iee.nagoya-u.ac.jp Fax: +81 52 789 4201

Tel: +81 52 789 5457/5406/5405

Website: http://nupace.iee.nagoya-u.ac.jp/en/

### Flow Chart of NUPACE Application Procedures for 2015-2016 Admissions



## ■ NUPACE Application Form

Affix photograph (3.5 cm x 4.5 cm) professionally taken within last three months.

The photograph should be taken directly from the front, and show the applicant's <u>head and</u> <u>shoulders</u>. No headwear is permitted.

\* TYPE or PRINT all information in Roman letters and Arabic numerals. Applications filled out by pencil will not be admitted.

| Name:                                                                                                                                                        | (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | )                                                               |                                                                                                         | (                                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|
| family na                                                                                                                                                    | me Chinese char                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | racter(s) giv                                                   | en (including middle) nam                                                                               | te(s) Chinese chara                                                        |
| Sex: Male / Female                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3. Date of b                                                    | oirth:/                                                                                                 | onth day                                                                   |
| Country of citizenship:                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                                                                                         |                                                                            |
| Tel/Fax:                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | E-m                                                             | nail:                                                                                                   |                                                                            |
| Current university & fa                                                                                                                                      | culty/department: <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Jniversity:                                                     |                                                                                                         |                                                                            |
| Faculty/Dept:                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                                                                                         |                                                                            |
|                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                                                                                         |                                                                            |
| Current degree (e.g. BS                                                                                                                                      | ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | •                                                               |                                                                                                         |                                                                            |
| Year: 1 <sup>st</sup>                                                                                                                                        | 2 <sup>nd</sup>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 3 <sup>rd</sup>                                                 | 4 <sup>th</sup>                                                                                         | 5 <sup>th</sup>                                                            |
|                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                 |                                                                                                         |                                                                            |
| exchange in Japan: <u>Yea</u><br>List all universities/co<br>Transcripts for all instit                                                                      | r:<br>olleges of higher e                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Mo                                                              | onth:                                                                                                   | ost recent institut                                                        |
| exchange in Japan: Yea<br>List all universities/co<br>Transcripts for all instit<br>transcripts.)                                                            | r:<br>olleges of higher e<br>tutions must be encl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Moducation atten                                                | onth:  aded in order of mo application. (DO NO                                                          | ost recent institut<br>T enclose high sch                                  |
| exchange in Japan: Yea  List all universities/co  Transcripts for all institution  Name of institution                                                       | r:  olleges of higher etutions must be encl                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Moducation attention osed with your                             | onth:  aded in order of mo application. (DO NO                                                          | ost recent institut: T enclose high sch                                    |
| exchange in Japan: Yea  List all universities/co  Transcripts for all institution  Name of institution                                                       | r:  olleges of higher e tutions must be encl  Date of atte                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Modeducation attendosed with your                               | onth:  aded in order of mo application. (DO NO                                                          | ost recent institut<br>T enclose high sch<br>Qualification                 |
| exchange in Japan: Yea List all universities/co Transcripts for all instit transcripts.) Name of institution  Prospective affiliation Refer to the School/De | colleges of higher extractions must be encled to the Date of attentions with the college of the  | education attention osed with your endance  university, consed: | onth:  aded in order of mo<br>application. (DO NO<br>Major                                              | ost recent institut<br>T enclose high sch<br>Qualification                 |
|                                                                                                                                                              | olleges of higher extractions must be encluded by the contract of attempts of the NU contract of the Nu cont | education attentosed with your endance  University, cosed:  2nd | onth:  Ided in order of me application. (DO NO Major  Orresponding to your Choice:  tus (p. 4)/NUPACE v | Ost recent institut: T enclose high sch  Qualification  major field of stu |

| 13.  | Planned period of enrolment at Nage  ☐ Autumn Semester Only (Semester dat ☐ Autumn & Spring Semesters (Semester ☐ Spring Semester Only (Semester dates | es: Late September ~ E<br>er dates: Late September<br>: Early April ~ Early Au | arly February)<br>: ~ Early August)<br>igust)           |                                                |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|---------------------------------------------------------|------------------------------------------------|
|      | ☐ Spring & Autumn Semesters (Semester                                                                                                                  | er dates: Early April ~ E                                                      | arly February)                                          |                                                |
| 14.  | Specify your intended period of requirements at your home institution                                                                                  |                                                                                |                                                         |                                                |
|      | From Late Sep 2015 / Early Apr 2010                                                                                                                    | 6 (circle one) to                                                              | (mo.) /                                                 | (yr.)                                          |
|      | (The student status of applicants intending to leave                                                                                                   | ve Nagoya University at th                                                     | e end of spring semester will be va                     | lid until August 31st.)                        |
| 15.  | Are you willing to participate in Margaram Scholarship for Short-term circling "yes" are required to attach a from their home institution to their app | Study in Japan (JA 'statement of bank a                                        | SSO Scholarship)" is unscount balance' or a proof       | successful? Applicants of financial assistance |
|      | □ Y                                                                                                                                                    | es                                                                             | □ No                                                    |                                                |
| 16.  | Using a separate sheet of A4-sized related to your major and plan of s prospectus 2015-2016 available on th of courses. (English: Minimum 400 v        | study whilst at Nag<br>e NUPACE website                                        | goya University. Please re<br>e (http://nupace.ecis.nag | efer to the NUPACE goya-u.ac.jp) for a list    |
| 17.  | (Only for those applicants intending been in contact with a faculty mainformation.                                                                     |                                                                                |                                                         |                                                |
|      | Faculty member's name:                                                                                                                                 |                                                                                |                                                         |                                                |
|      | Dept/School at Nagoya University:                                                                                                                      |                                                                                |                                                         |                                                |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
| nart | I, the undersigned, certify that the icipate in the Nagoya University Prog                                                                             |                                                                                |                                                         | and hereby apply to                            |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
| Арр  | licant's signature:                                                                                                                                    |                                                                                | Date:                                                   |                                                |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
|      | Contract                                                                                                                                               |                                                                                |                                                         |                                                |
|      | Contract                                                                                                                                               |                                                                                |                                                         |                                                |
|      |                                                                                                                                                        |                                                                                |                                                         |                                                |
| I,   |                                                                                                                                                        | ,                                                                              | upon being admitted to                                  | the Nagoya University                          |
| Prog | ram for Academic Exchange (NUPACE                                                                                                                      | E) hereby promise to                                                           | obey the laws of Japan, as                              | well as the regulations                        |
|      | down by Nagoya University concerning t<br>am fully aware that a serious violation                                                                      |                                                                                |                                                         | ny expulsion from the                          |
| Univ | versity and deportation from the country                                                                                                               | y. Moreover, I do no                                                           | t hold the University respo                             |                                                |
|      | luct nor for my personal debts nor for fir<br>nally, if I am a recipient of a "Student Ex                                                              |                                                                                |                                                         | term Study in Japan", I                        |
|      | nise to abide by the provisions set out in                                                                                                             |                                                                                | - <b>-</b>                                              |                                                |
|      | e a e                                                                                                                                                  |                                                                                | D                                                       |                                                |
| App  | licant's signature:                                                                                                                                    |                                                                                | Date:                                                   |                                                |

### **Nagoya University School/Department List**

To be used as a reference for *Q.11* on the NUPACE Application Form.

| Undergraduate students. |  | Undergraduate | Students: |
|-------------------------|--|---------------|-----------|
|-------------------------|--|---------------|-----------|

Law:

Schools <u>Departments/Majors</u>

Applied Biosciences; Bioresource Sciences; Bioenvironmental Sciences **Agricultural Sciences:** 

Economics: Economics (Theoretical Economics; Applied Economics)

Business Administration (Corporate Management; Information Accounting)

Education: Lifelong Education and Development; School Education and Information Science; International Education and Culture; Human Psychology; Counselling and Psychotherapy

**Engineering:** Chemical and Biological Engineering; Physical Science and Engineering; Electrical and

Electronic Engineering and Information Engineering; Mechanical and Aerospace Engineering; Civil Engineering and Architecture

Informatics & Sciences: Natural Science Informatics (Complex System and Informatics; Mathematical Science and

Informatics; Environmental Science of Earth and Materials)

Social and Human Science Informatics (Juristic and Economic Studies of Environments; Sociological-Geographical Studies of Environment; Psychology; Society and Media Studies) Fundamental Positive Law; Fundamental Political Science; Contemporary Legal Disciplines;

Dispute Settlement Law; Business Economics Law; Public Policy; International Relations;

Legal and Administrative Informatics

Letters: Philosophy and Civilisation Theory; History and Cultural History; Literature and Linguistics;

Environmental and Behavioural Science

Medicine: Medicine; Health Sciences (Medical Technology; Nursing; Occupational Therapy; Physical

Therapy; Radiological Technology)

Science: Mathematics; Physics; Chemistry; Biological Science; Earth and Planetary Sciences

#### **Graduate Students:**

<u>Schools</u> <u>Departments</u>

**Bioagricultural Sciences:** Applied Molecular Biosciences; Bioengineering Sciences; Biological Mechanisms and

Functions; Biosphere Resources Science

**Economics:** Analysis of Markets and Institutions; Socio-economic Analysis; Analysis of the System of

Policy Making; Socio-Environmental System; Corporate System; Management Innovation;

Creation of Information

Educ. and Human Development: Lifelong Education and Development; School Education and Information Sciences;

Foundations of Education and Human Development; Higher Education; Sports Science for Lifelong Physical Activity; Psychological Sciences; Human Development and Clinical

Psychology; Sports Behavioural Sciences

Aerospace Engineering; Applied Chemistry, Chemical Engineering and Biotechnology; Civil **Engineering:** 

Engineering; Computational Science and Engineering; Crystalline Materials Engineering; Electrical Engineering and Computer Science; Energy Engineering and Science; Materials, Physics and Energy Engineering; Mechanical Science and Engineering; Micro-Nano Systems

International Communication; International Cooperation Studies; International Development

Engineering; Molecular Design and Engineering; Quantum Engineering

**Environmental Studies:** Earth and Environmental Sciences; Environmental Engineering and Architecture; Social and

Human Environment

Complex Systems Science; Computer Science and Mathematical Informatics; Information **Information Science:** 

Engineering; Media Science; Systems and Social Informatics

**International Development:** 

Languages & Cultures:

Law:

Japanese Language & Culture; Multicultural Studies

Core Law and Political Science; Contemporary legal Systems; International Comparative Law and Political Science; Asian Law and Political Science

Letters: Art History and Archaeology; Comparative Studies of Humanities; Japanese Culture; Japanese

History; Japanese Literature and Linguistics; Linguistics; Oriental History; Philosophy;

Western Literature and Linguistics; World History; Eastern Studies

Mathematics:

Integrated Medicine (Basic Medicine; Clinical Medicine; Clinical Pharmacology) Medicine:

Medical Science; Medical Science and Healthcare Administration; Nursing; Radiological and

Medical Laboratory Sciences; Physical and Occupational Therapy

**Pharmaceutical Sciences:** Basic Medicinal Sciences

Science: Biological Science; Material Science; Particle and Astrophysical Science

### **■** Confidential Reference Form

| Nago                |                                                                             | s reference form, which will ish to withdraw this waiver, I i | be entered into my file at the NUPACE Office, may do so and I authorise the NUPACE Office to |
|---------------------|-----------------------------------------------------------------------------|---------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| Appli               | cant's signature:                                                           |                                                               | Date:                                                                                        |
|                     |                                                                             |                                                               |                                                                                              |
| □<br>NB. ′<br>major |                                                                             |                                                               | an academic field closely related to the applicant's                                         |
| Name                | e of applicant:                                                             |                                                               |                                                                                              |
| 1.                  | How long have you known the                                                 | applicant? In what capacity?                                  |                                                                                              |
| 2.                  | Please rate the applicant's acade                                           | emic ability in comparison with                               | students at the same level of study.                                                         |
|                     | Top 5% Top                                                                  | 10% Top 25% _                                                 | Other                                                                                        |
|                     | Please rate the applicant in the D = below average):                        | following areas, using an A∼I                                 | O scale (A = outstanding; B = good; C = average;                                             |
| ]                   | Motivation:                                                                 | Maturity:                                                     | International Outlook:                                                                       |
| (                   | Creativity:                                                                 | Interpersonal Skills:                                         |                                                                                              |
|                     | Please give your <u>candid opinion</u><br>a separate sheet of paper, if nec |                                                               | emic performance, character and adaptability. Use                                            |
| Signa               | ture:                                                                       |                                                               | Date:                                                                                        |
| Full N              | Name <please print="">:</please>                                            |                                                               |                                                                                              |
|                     |                                                                             |                                                               |                                                                                              |
| -                   | •                                                                           |                                                               |                                                                                              |
| Conta               | act Details: 1) Tel/Fax:                                                    |                                                               | ) E-mail:                                                                                    |

**NB.** After completing this form, insert it into an envelope, seal and sign your name over the seal. The envelope should be sent either to the applicant or to your institution's International Office, according to request.

## ■ Language Proficiency

| 1.                               | Name:                                                                         |                                                                                                             | (                                                                                                                 | )                                                                  |                                                                               |                                               | _ ( )                                                                  |
|----------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------|------------------------------------------------------------------------|
|                                  |                                                                               | family name                                                                                                 | Chinese charac                                                                                                    | ter(s) give                                                        | n (including middle)                                                          | name(s)                                       | Chinese character(s)                                                   |
| Nat                              | ive Language:                                                                 |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
| atte<br>a T<br>a C<br>uni<br>Tes | ond universities of S<br>OEFL score of S<br>EFR average grayersity courses it | where English is<br>550 <cbt 213<br="" =="">rade of B2, a Cl<br/>nstructed in Jap<br/>alent. Applican</cbt> | ents to be profices the language of; iBT = 79>, an IET-6 score of 450 panese must posses should enclose packages. | instruction, instruction, in ELTS overal or the equivers Level 1/2 | non-native Engli<br>I band score of 6<br>valent. Students<br>N1 of the Japane | sh speakers .0, a TOEI intending t ese Langua | s must possess<br>C score of 780,<br>to take regular<br>ge Proficiency |
|                                  | English La                                                                    | nguage Abili                                                                                                | y:                                                                                                                |                                                                    |                                                                               |                                               |                                                                        |
| 1.                               | If English is not had.                                                        | t your native lang                                                                                          | uage, please indicat                                                                                              | e how many y                                                       | vears of English lan                                                          | nguage instr                                  | uction you have                                                        |
|                                  | Total of                                                                      | years                                                                                                       |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
| 2.                               | State the name taken, and score                                               |                                                                                                             | nally recognised En                                                                                               | glish language                                                     | e examination (e.g.                                                           | , TOEFL, I                                    | ELTS, TOEIC)                                                           |
|                                  | Name of Exami                                                                 | ination:                                                                                                    |                                                                                                                   |                                                                    | S                                                                             | core <s>:</s>                                 |                                                                        |
|                                  | Components:                                                                   |                                                                                                             |                                                                                                                   |                                                                    |                                                                               | _                                             |                                                                        |
|                                  |                                                                               |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
|                                  |                                                                               |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
|                                  | Japanese L                                                                    | anguage Abil                                                                                                | ity:                                                                                                              |                                                                    |                                                                               |                                               |                                                                        |
| 1.                               | Do you intend t                                                               | to take a Japanese                                                                                          | language course at                                                                                                | Nagoya Univ                                                        | ersity?                                                                       |                                               |                                                                        |
|                                  | Yes                                                                           | No                                                                                                          |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
| 2.                               | Have you previo                                                               | ously studied Japa                                                                                          | nese?                                                                                                             |                                                                    |                                                                               |                                               |                                                                        |
|                                  | Yes                                                                           | No                                                                                                          |                                                                                                                   |                                                                    |                                                                               |                                               |                                                                        |
| 3.                               | Please answer th                                                              | ne following ques                                                                                           | tions regarding the                                                                                               | Japanese cour                                                      | ses you have taker                                                            | 1:                                            |                                                                        |
|                                  | Name of School(s                                                              | )                                                                                                           | Period of Study                                                                                                   | Textbook                                                           | g(s)                                                                          | -                                             | Lessons completed                                                      |
|                                  |                                                                               |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               | ~                                                                      |
|                                  |                                                                               |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               | ~                                                                      |
|                                  |                                                                               |                                                                                                             |                                                                                                                   |                                                                    |                                                                               |                                               | ~                                                                      |
|                                  |                                                                               |                                                                                                             |                                                                                                                   | _                                                                  |                                                                               |                                               |                                                                        |
|                                  | _                                                                             |                                                                                                             |                                                                                                                   | <u> </u>                                                           |                                                                               |                                               | ~                                                                      |
| 4.                               | Approximately 1                                                               | how many Chines                                                                                             | e characters (kanji)                                                                                              | can you read?                                                      |                                                                               | Kanji                                         |                                                                        |
| 5.                               | If you have pas obtained:                                                     | sed the Japanese                                                                                            | Language Proficier                                                                                                | acy Test (JLP)                                                     | Γ), please indicate                                                           | the level and                                 | d score that you                                                       |
|                                  | 1) 1-kyuu                                                                     | 2) 2-kyuu                                                                                                   | 3) 3-kyuu                                                                                                         | 4) 4-kyuu                                                          | S                                                                             | core:                                         |                                                                        |
|                                  | 1) N1                                                                         | 2) N2                                                                                                       | 3) N3                                                                                                             | 4) N4                                                              | 5) N5 S                                                                       | core:                                         | _                                                                      |

## ■ Health Certificate

| The information you provide                                                                            | e here wil  | l not be taken into consi  | deration in the  | admissions selection pro | cess.              |
|--------------------------------------------------------------------------------------------------------|-------------|----------------------------|------------------|--------------------------|--------------------|
| Name:                                                                                                  |             |                            | Date             | of Birth:/               | /                  |
| Please answer the question physical examination.                                                       |             |                            |                  |                          |                    |
| 1. List any diseases, disord                                                                           | lers or inj | uries that you have had i  | in the past five | years?                   |                    |
|                                                                                                        |             | ng/undergone any treatn    | nent for mental  | health-related symptom   | s in the last five |
| years? If yes, please specify.                                                                         |             |                            |                  |                          | es/No              |
| 3. Do you have any allerg                                                                              | ies to foc  | ds, plants or animals? Pl  | lease specify.   | Ye                       | es/No              |
| 4. Have you ever had an                                                                                | adverse re  | eaction to medication? P   | lease specify.   | Ye                       | es/No              |
| 5. Are you taking medicar                                                                              | tion now?   | Please specify.            |                  | Ye                       | es/No              |
| ☐ To the Physician Please review the applicant positive indications. If there  1.Head/Ears/Nose/Throat | 's medica   | bnormalities in the follow |                  |                          | etail.             |
| 2.Respiratory                                                                                          | +/-         | 5.Genitourinary            |                  | 8.Neuropsychiatric       |                    |
| 3.Cardiovascular                                                                                       | +/-         | 6.Musculoskeletal          | +/-              | 9.Skin                   | +/-                |
| Physician's Comments:                                                                                  |             |                            |                  |                          |                    |
| After reviewing the applican mentally of completing a one                                              |             |                            |                  |                          | e physically and   |
| Physician's signature:                                                                                 |             |                            |                  | Date:                    |                    |
| Physician's name <please pr<="" td=""><td>int&gt;:</td><td></td><td></td><td></td><td></td></please>   | int>:       |                            |                  |                          |                    |
| Address:                                                                                               |             |                            |                  |                          |                    |
| Contact Details: 1) Tel/Fax:                                                                           |             |                            | _ 2) E-mail:     |                          |                    |

### **■** Personal Data Sheet

Information provided on this form will only be used for the purpose of admission correspondence, immigration application procedures, and in cases of emergency.

| Name:                                    | _ (               | )                      |            |               | (            | ,                |
|------------------------------------------|-------------------|------------------------|------------|---------------|--------------|------------------|
| family name                              | Chinese character | r(s) given (inc        | luding mic | ldle) name(s) | Chine        | ese character(s) |
| Sex: Male / Female                       | 3.                | Date of birth: _       | year       |               | /day         | _                |
| Place of birth:                          |                   |                        | ·          |               | ·            |                  |
| (1) Country:                             |                   | ) (2) State/Provin     | ice:       |               |              |                  |
| (3) City/Town:                           | Chinese chara     |                        |            |               | Chin         | ese character(s  |
|                                          |                   |                        |            | Chinese o     | character(s) |                  |
| Country of citizenship:                  |                   |                        |            |               |              |                  |
| Mailing address for all correspondence:  |                   |                        |            |               |              |                  |
|                                          |                   |                        |            |               |              |                  |
|                                          |                   |                        |            |               |              |                  |
| Tel/Fax:                                 |                   |                        |            |               |              |                  |
| E-mail:                                  |                   |                        |            |               |              |                  |
| Permanent Address (if different from abo | ove):             |                        |            |               |              |                  |
|                                          |                   |                        |            |               |              |                  |
|                                          |                   |                        |            |               |              |                  |
|                                          |                   |                        |            |               |              |                  |
| Tel/Fax:                                 |                   |                        |            |               |              |                  |
| E-mail:                                  |                   |                        |            |               |              |                  |
| Passport information:                    |                   |                        |            |               |              |                  |
| (1) Number:                              |                   | (2) Issuing Aut        | hority:    |               |              |                  |
| (3) Date of issue: / / / year month      | day               | (4) Date of expiration | on:        | year          | / month      | day              |
| Nearest Japanese Embassy/Consulate       | -                 |                        |            | -             |              | -                |

| 9.  | Past entry into/stay in Japan:                                                                                                                                                                             | Yes, time(s) /               | No         |                  |              |            |                  |                   |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------|------------------|--------------|------------|------------------|-------------------|
|     |                                                                                                                                                                                                            | Most recent entry:           | year       | / mon            |              |            |                  | onth day          |
|     | NB. Please fill in the exa                                                                                                                                                                                 | act date of your most recent | -          |                  | •            |            | •                | ,                 |
| 10. | Criminal record:                                                                                                                                                                                           | Yes / No                     |            |                  |              |            |                  |                   |
|     | Details, if applicable:                                                                                                                                                                                    |                              |            |                  |              |            |                  |                   |
| 11. | Family <father, mother,="" spous<="" td=""><td>se, son, daughter, broth</td><td>ner, siste</td><td>r&gt; <u>alre</u>a</td><td>ady residii</td><td>ng in Japa</td><td>an: Yes / N</td><td>lo</td></father,> | se, son, daughter, broth     | ner, siste | r> <u>alre</u> a | ady residii  | ng in Japa | an: Yes / N      | lo                |
|     | NB: You will be asked to give details required by the Immigration Burea                                                                                                                                    |                              | Japan afte | r your ap        | plication to | NUPACE     | is accepted. Thi | is information is |
| 12. | Total period of education <pr< td=""><td>imary school to last ye</td><td>ar of stu</td><td>dy com</td><td>pleted&gt;:</td><td></td><td>years</td><td></td></pr<>                                           | imary school to last ye      | ar of stu  | dy com           | pleted>:     |            | years            |                   |
|     | Expected date of graduation:                                                                                                                                                                               | /                            |            |                  |              |            |                  |                   |
|     |                                                                                                                                                                                                            | year month                   |            |                  |              |            |                  |                   |
| 13. | Marital status: Single / Marr                                                                                                                                                                              | ried / Other                 |            |                  |              |            |                  |                   |
| 14. | Will any dependants accompa-                                                                                                                                                                               | ny you to Japan?) Yes        | / No       |                  |              |            |                  |                   |
|     |                                                                                                                                                                                                            | Name                         |            |                  |              | Rela       | tionship to ap   | pplicant          |
|     |                                                                                                                                                                                                            |                              |            |                  |              |            |                  |                   |
|     |                                                                                                                                                                                                            |                              |            |                  |              |            |                  |                   |
| 15. | Religion, if any:                                                                                                                                                                                          |                              |            |                  |              |            |                  |                   |
| 16. | A close family member to be                                                                                                                                                                                | notified in home coun        | try in cas | se of an         | emergen      | cy:        |                  |                   |
|     | Name:                                                                                                                                                                                                      |                              | Re         | lationsl         | nip to app   | licant: _  |                  |                   |
|     | Tel/Fax:                                                                                                                                                                                                   |                              |            |                  |              |            |                  |                   |
|     | E-mail:                                                                                                                                                                                                    |                              |            |                  |              |            |                  |                   |
|     | Address (if different from hon                                                                                                                                                                             | ne address):                 |            |                  |              |            |                  |                   |
|     |                                                                                                                                                                                                            |                              |            |                  |              |            |                  |                   |