## 2024 Fall Term Admissions

Graduate School of Sustainable System Sciences, Osaka Metropolitan University

## **Entrance Examination for International Students Application for Admission to Master's Program**

	Department of ch		hoice			
Applicant ID  Number		Desired Superv	visor			
rumoer		Examination Category  Environm		onmental Sciences or	Human Sciences only. Please see p.13.	
(If possible, in Katakana above)					Paste Photograph Here	
Name					A front-facing photograph of your head without a hat taken	
Preferred Name				within the past three months. Please write your name		
	(YYYY/MM/DD	)	Sex		on the back of the photo. (4 cm x 3 cm)	
Date of Birth			Male / Fema	ale		
Nationality			Residence Statu	s*1 Yes	□ ( )/No □	
Address	(Postal code Telephone No.	- )				
E-mail address						
Applicant Qualifications	University, Faculty, Department  Veen / Month / Davi					
Quantifications	Year / Month / Day: Graduated / Scheduled to graduate Student Number					
	(Complete this field only if you are already enrolled at Osaka Metropolitan University, Osaka Prefecture University or Osaka City University)					
Research Topic After Admission						
* Contact Addres for Acceptance Notification	S	— )	)Telephone No.	_	_	
Emergency Contact	Name			Relationship		
	Telephone No.					

## [Important Information]

- † Do not fill in the \* marked field.
- \*1 Please indicate whether you have status of residence by put a tick mark 🗸 next to the Yes/No option. When you have placed a mark 🗸 next to the Yes option, you must indicate your status of residence within brackets.
- \*2 You do not need to complete this line if your contact address is the same as your current address. If your current address is outside Japan, please enter an address in Japan where you wish to receive your notification of acceptance.
- \*3 Please enter a phone number etc. to contact in the case of an emergency contact in Japan.