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| Graduate School of Engineering, Osaka Metropolitan University  **Application for Admission to the Master's Degree Program (2)**  The applicants to the following divisions must submit this form in addition to “Application for Admission to the Master's Degree Program”:  - Aerospace and Marine-System Engineering (Marine System Engineering)  - Electrical and Electronic Engineering (Electrical and Electronic Systems Engineering)  - Urban Engineering (Architecture and Building Engineering/Urban Design and Engineering)  - Physics and Electronics (Physics and Electronics) |

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| Division |  | (If possible, here in Katakana) |  |
| Department |  | Full Name |  |

**Please fill in only the fields of the Division (Department) you are applying to.**

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| **Aerospace and Marine-System Engineering (Marine System Engineering)**  **Electrical and Electronic Engineering (Electrical and Electronic Systems Engineering)** | |
| Name of the faculty member you wish to be supervised by. |  |

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| **Mechanical Engineering (Mechanical Engineering)** | | | |
| Name of the research group you wish to join or the name of the faculty member you wish to be supervised. | | | |
| 1st choice |  | 6th choice |  |
| 2nd choice |  | 7th choice |  |
| 3rd choice |  | 8th choice |  |
| 4th choice |  | 9th choice |  |
| 5th choice |  | 10th choice |  |

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| **Urban Engineering (Architecture and Building Engineering/Urban Design and Engineering)** | | | |
| Name of the faculty member from whom you wish or the name of the research group you wish to be supervised. |  | | |
| Basic subject for examination. (Please select one subject and ✔ (fill in) the box) | | Architectural basic subjects |  |
| Urban engineering basic subjects |  |
| The examination of the specialized subject will be the one that corresponds to “the faculty member from whom you wish or the name of the research group” entered in the upper column. | | | |

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| **Physics and Electronics (Physics and Electronics)** | | | | |
| Name of the faculty member you wish to be supervised. |  | Name of the research group you wish to join |  | |
| Course of interest (Please select the course of affiliation of the faculty from whom you wish to receive guidance by ✔ (filling in) the box). | | | Course of Physics for Electronics |  |
| Course of Electronic Materials |  |
| Fall enrollment (2025) only: The applicant will have to take the examination for the selected course. | | | | |

- Leave blank the field marked with “※”.

- If handwritten, make sure all forms are completed with a black pen or ballpoint pen (erasable pens are not acceptable).

Please submit a printed form (one page, print on single-sided on A4 or letter size paper). You can change the text font size and line spacing in the input area.