

FY 2024 Graduate School of Rehabilitation Science

Master's Program Photo Card

Examinee number	*
Desired field of study	
Name	
Date of birth	/ /
<div style="border: 1px dashed black; padding: 10px; width: fit-content; margin: 0 auto;"> <p>Photo</p> <p>4 cm x 3 cm</p> <p>Photo of your upper body in full face without a hat, taken within the last 3 months</p> <p>Write your desired field of study and name on the back of your photo, cut your photo into the same size as the part surrounded by the dotted line, and affix it to that part.</p> </div>	

(To be cut off by the university)

(To be cut off by the university)

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Master's Program Entrance Examination Card

We have received your application documents.

Your examinee number is as follows.

Desired field of study	
Name	
Examinee number	*

* Please do not fill in the section marked *.

Note

Please be sure to bring this entrance examination card with you on the day of the examination.

Examination Osaka Metropolitan University

location Habikino Campus

3-7-30 Habikino, Habikino City, Osaka Prefecture