Graduate School of Informatics, Osaka Metropolitan University

Entrance Examination for International Students

Application for Admission to the Doctoral Degree Program

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant ID Number | ※ | Department of choice |  |
| Course of choice＊2(Department of Core Informatics) |  |
| Preferred＊1Admission Date | [ ]  April 2024 ( 　 screening)[ ]  September, October 2023 | Desired Supervisor |  |

 [ ]  I had applied to the professors associated with the department I would like to study before I submitted the application.

＊3

|  |  |  |
| --- | --- | --- |
| (If possible, here in Katakana) |  |  |
| **Full Name** |  |  |
| Full Name(in own language, if applicable) |  | Attach Photo Here(Frontal portrait with head uncovered taken within the past three months)(4 cm × 3 cm) |
| Date of birth | Year / Month / Day | Sex |  |
| Male / Female |
| Nationality |  | Residence Status＊4 | [ ]  Yes ( ) / [ ]  No  |
| Address＊5 | (Postal code － ) |
|  |
| Tel: |  － －  |
| E-mail address |  |
| Applicant Qualifications | Graduate School:  |  |
| Department: |  |
| Course: |  |
| Year / Month / Day: |  | [ ]  Graduation / [ ]  Expected to graduate |
| Absence from studies | From To (Reason) |
| [ ]  Yes / [ ]  No |
| School Registration Number(Osaka Metropolitan University / Osaka Prefecture University / Osaka city University) |  |
| Contact in Japan＊6 | Name |  | Relationship |  |
| Tel |  |
| Long-Term Study System＊7 | [ ]  Yes / [ ]  No |

【Notes】

・Please prepare the document using this form and submit its printout (one A4).

・Do not fill in the ※ marked field.

・You may submit a printed copy of the form with a clear photograph of your face digitally inserted into the form.

【Filled information】

\*1 Please mark with a check☑.For applicants for spring admission, please indicate the application period

 ( **First** screening / **Second** screening).

\*2 Applicants for the Department of Core Informatics should indicate the course ( **Intelligent Informatics** /

**System Informatics**).

\*3 Please mark with a check☑after verifying the content.

 \*4 Please mark with a check☑the answer to the question: Do you have a visa to reside in Japan? Yes / No

 If you check☑ “Yes,” please indicate the type of visa inside the parentheses.

 \*5 If you wish to have the acceptance letter sent to an address other than your current address, please let us know.

 \*6 Please enter a phone number other than your home phone number where we can contact you in case of emergency.

 \*7 Please refer to p.13 and mark with a check☑. (If you are interested in this option, please contact the education affairs

　　division before submitting your application.)