Short-Term Exchange Program in Science and Engineering

at Tokyo University of Agriculture and Technology

STEP＠TUAT

Application Package Checklist

**Application materials should be sent by e-mail in a complete package containing all the following documents.**

#### Checklist Check

1. Completed STEP@TUAT Application for Admission – Form 2022-A-1～8 □

2. Your own e-mail address is specified in Form 2022-A-2 □

3. Completed health certificate (in English) －Form 2022-B □

4. Certificate of Enrollment for TUAT issued from the home institution □

 (either in English or in Japanese)

5. Academic Record Transcript (either in English or in Japanese) □

6. Explanation for Grade System of your Academic Record Transcript with an

authorized signature (either in English or in Japanese) □

7. Result of TOEFL or other equivalent documents (non-English speaking countries) □

8. Copies of Passport and ID (if available) □

9. Copies of correspondence records with TUAT Advisor, showing the arrangement

 of acceptance by the academic advisor (only for GR category) □

**☆Please don’t forget to send this checklist with the above documents.**

**This application package should be checked by the office responsible for the student exchange at the applicant’s home institution and submitted to TUAT.**

 I certify that all the information provided in this form and the accompanying documents is complete and accurate to the best of my knowledge, and if admitted, I agree to comply with the rules and regulations of Tokyo University of Agriculture and Technology.

Date (Year)　　　 (Month) 　 (Day)

　　　　　　　　　　　　　 Applicant’s Name

Applicant’s Signature

The application package is not returnable.STEP-TUAT Form 2022-A-1

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# Choose One Category

|  |  |  |
| --- | --- | --- |
| **Category V2** | **Special Auditing Student****(from Sep. 2022 to Aug. 2023)** |  |
| **Category GR** | **Special Research Student** **(from Sep. 2022 to Aug. 2023)** |  |

|  |
| --- |
| What is your Major? (Choose One) |
| Agriculture Related  | Engineering Related  | Others  |

APPLICATION FOR ADMISSION

**東京農工大学科学技術短期留学プログラム申請書**

**※Please fill in Item 1 to 19 by the applicant.**

以下、1～19まで受講希望者本人が記入すること

Date of application

Year Month Day

 　20 年　　 　 月　　 　日

To: President,

Tokyo University of Agriculture and Technology

東京農工大学長殿

I wish to apply for admission as a special auditing/research student to your university.

私は下記のとおり、特別聴講／研究学生として入学したいので、別紙関係書類を添えて出願します。

1. Name in full in **Block Letters** **(as shown on your passport)**

（姓名）

**Photo**

写真

Paste your

Photograph

(4cm x 3cm)

　　　　　　　**(Family) (First) (Middle)**

**\*Family name in Capital Letters**

2. Nationality

（国籍）

STEP-TUAT Form 2022-A-2

(Taken within the **last 3 months**)

3. Your own e-mail address\* (Please type or write **in block letters**.)

 \*Please write your e-mail address that you access frequently.

　　（電子メールアドレス）

|  |
| --- |
| 　　　　　 　　 ＠  |

4. Present status: Name of the home institution and faculty attended

　　（在学大学・学部名等）

Home institution Faculty

5. Date of birth

　　（生年月日） Year Month 　　 Day

 (年)　　　　　 （月） 　　　　（日）

6. Place of birth (Name of province and city)

(If you are Chinese, please write in Chinese characters.)

　　（出生地）

7. Gender

　　（性別） □ Male □ Female

8. Marital status

　　（未婚・既婚の別） □ Single □ Married

9. Passport information (if available)

　　（パスポート関係） Number: 　 　 　Date of issue:

 Issuing authority: 　　　　　　　　　Date of expiration:

　Do you have a Japanese nationality simultaneously (dual nationality)? □ Yes □ No

　　**If you have a passport, a copy should be attached to the application form.**

10. Place to apply for Japanese Visa

　　（ビザ申請地） Name of city in your country :

11. Past entry into Japan

　　（過去の渡日歴） □ Yes ( times) □ No

　　（最近の出入国歴) The latest entry from 　 　year　 month　 　day to 　 year　 　month　 　day

12. The nearest international airport in your country available when coming to Japan:

　　（最寄りの国際空港）

 Name of airport :

STEP-TUAT Form 2022-A-3

13. Contact addresses (Please type or write **clearly**.)

　　（連絡先）

　1) Present address of the applicant

　　（現住所）

 Address

 Zip Code /Area Code (if you have)

 Phone 　 　 　　　　　Fax

 E-mail

　2) Mail address (if different from your present address)

　　（郵送先）

 Address

 Zip Code /Area Code (if you have)

 Phone 　　 　　　 　 　　　　　　Fax

　3) Home address (if different from your present address)

　　（実家の住所）

 Address

 Zip Code /Area Code (if you have)

 Phone 　　　 　　　　 　　 　　　　Fax

 E-mail

　4) Contact address in case of emergency after you leave for Japan

　　（緊急時の連絡先）

 Person to contact

 Address

 Zip Code /Area Code (if you have)

 Phone 　　　 　　　　Fax

 E-mail

14. Academic Supervisor in TUAT for GR Category

　　（東京農工大学指導教員）

 \*V2 Category Applicants do not need to fill.

Faculty or Department

Supervisor’s Name

**\* GR Category students should find a TUAT supervisor prior to application.**

STEP-TUAT Form 2022-A-4

15. Educational background

　　（学歴）

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Name and Address of School（学校名及び所在地） | Year and Monthof Entranceand Completion（入学及び卒業年月） | Major Subject（専攻科目） | Diploma orDegreeAwarded（学位・資格） | Periodof Education（修学期間） |
| ElementaryEducation(初等教育) | Name(学校名)Location(所在地) | From (入学)To(卒業) |  |  | years andmonths |
| Secondary\*1Education(中等教育) | Name(学校名)Location(所在地)Name(学校名)Location(所在地) | From (入学)To(卒業)From (入学)To(卒業) |  |  | years andmonths |
| Higher\*2Education(高等教育) | Name(学校名)Location(所在地) | From (入学)To(卒業) |  |  | yearsandmonths |
| GraduateLevel(大学院) | Name(学校名)Location(所在地) | From (入学)To(卒業) |  |  | years and months |
| \*1 Junior High School and High school \*2 Undergraduate16. When do you expect to graduate / complete your studies at home institution if you are selected into STEP@TUAT program? 　　（STEP修了後の母校での卒業年および月） Year:　　 　　　　Month:　 　　 (Note: **You should be a registered student of your home institution until the end of STEP@TUAT.)** | Total Period of Education(修学期間合計) | Totalyears andmonths |

17. Do you have Japanese language background?

　　（日本語の学習歴）

□ Yes □ No

If yes, how long? \_\_\_\_\_\_ year(s), and \_\_ \_\_month(s).

Your level of Japanese skill? □ Excellent □ Good □ Intermediate □ Beginner

Certificates in Japanese Studies : JLPT \_\_ \_\_\_\_\_\_\_\_\_\_\_

STEP-TUAT Form 2022-A-5

18. Essay about your study and your motive.

（これまでの学習と志望動機についてのエッセイ）

Full name:

Major field of study:

Summarize your major field of study and your reason for applying for this course.

(Please type or write **clearly**.)

|  |
| --- |
|  |

STEP-TUAT Form 2022-A-6

19. Essay about research at TUAT:

　　（東京農工大学での研究についてのエッセイ）

Full name:

Propose the field or the topic of research you would like to be involved in at TUAT.

 (Please type or write **clearly**.)

|  |
| --- |
|  |

STEP-TUAT Form 2022-A-7

###### Letter of Recommendation

**特別聴講／研究学生推薦書推薦書 (1/2)**

 　　　　※　**To be filled out by your academic advisor.**

※**在籍大学の担当教員が記入してください。**

1. Reasons for recommending the special auditing/research student

（東京農工大学特別聴講／研究学生としての推薦事由）

２．Please comment on any condition (health or other) which requires medical or special consideration.

 （本人の健康状況等その他留学に係わる特記事項）

Student’s Name

Academic Advisor’s Name

Advisor’s Signature

Advisor’s Affiliation

STEP-TUAT Form 2022-A-8

###### Letter of Recommendation

**特別聴講／研究学生推薦書推薦書 (2/2)**

 　　　　※　**To be filled out by your academic advisor.**

※**在籍大学の担当教員が記入してください。**

1. Reasons for recommending the special auditing/research student

（東京農工大学特別聴講／研究学生としての推薦事由）

２．Please comment on any condition (health or other) which requires medical or special consideration.

 （本人の健康状況等その他留学に係わる特記事項）

Student’s Name

Academic Advisor’s Name

Advisor’s Signature

Advisor’s Affiliation

STEP-TUAT Form 2022-B

## STEP@TUAT

## HEALTH CERTIFICATE

**Please use this designated form, be filled out in English by a physician.**

1. Name:

2. Gender: □Male □Female 　3. Nationality:

4. Birth Date: Year/Month/Day 　5. Blood Type:

6. Eyesight: glasses or contact lenses □unnecessary □necessary

7. Hearing: Right side □normal □impaired / Left side □normal □impaired

8. Medical History: Please indicate with a tick and fill in the date of recovery (Year/Month/Day).

Tuberculosis □No　□Yes( )

Malaria □No　□Yes( )

Rheumatic Fever □No　□Yes( )

Allergy □No　□Yes( )

Hypertension □No　□Yes( )

Cardiac Diseases □No　□Yes( )

Renal Disease □No　□Yes( )

Diabetes □No　□Yes( )

Epilepsy □No　□Yes( )

Other Internal Diseases □No　□Yes( )

Functional Disorder in Extremities □No　□Yes( )

Mental Disorder □No　□Yes( )

Other Remarkable Diseases □No　□Yes( )

9. Result of X-ray: □Direct □Indirect No.

 Date of X-ray: Year/Month/Day

 □Unremarkable(Normal)

　 □Remarkable (Comments: )

10. If he/she is carrying medicines/prescriptions, fill in the following.

 Name of Medicine For What Illness Symptoms? Dosage & Times Taken

11. General Remarks (Any additional information host university should be aware of)

After reviewing the applicant’s medical history and physical condition, I believe him / her to be in good physical and mental health, free of any chronic conditions, disorders or contagious diseases, and capable physically and mentally of completing two semesters of study in a Japanese university.

Date of Examination: Year/Month/Day

Address:

Name of Clinic/Hospital:

Doctor’s Name:

Signature: