GRADUATE SCHOOL OF GLOBAL ENVIRONMENTAL STUDIES KYOTO UNIVERSITY IEMP ENTRANCE EXAMINATION FOR DOCTORAL PROGRAM IN DECEMBER 2022

Qualification status
For administration use only.

Yes / No

ELIGIBILITY SCREENING APPLICATION FORM

1. I	DATE OF		/	/			
A	APPLICATION	Month	Day	Year	-		
		In KATAKAN.	A*:				
				/ s/In Kanji if applicable)	First (Only initial capitalized	/ /In Kanji if applicable)
		Full nar	ne (Fill in exactl	y as appeared on your p	assport)		
	DATE OF BIRTH Gender	Month	/ Day	/ Year	Gender	: () Male /	() Female
4. N	NATIONALITY		•				
5. 0	CONTACT DETA	AILS					
	Current address	3					
	Phone						
E-mail					(0	<i>ū</i>	
6. 5	STUDY AREA A	ND SUP	ERVISOR				
	Study area						
	Supervisor's na	ame					
7. 5	CHOLARSHIP						
	Name of scholarship program / sponsor	•					
Period of scholarship		Fron	n / 20	to	/ 20	(mo/yr)	
Amount of scholarship					/month		
8.HONORS (if applicable) Awards and honors received to date and/or score ranking in your previous academic program							

^{*}KATAKANA is one of the Japanese alphabets commonly used to express how to read foreign names in Japanese pronunciation.

9. EDUCATIONAL BACKGROUND

	Name of school Country where the		ed	Period: from -	- until (mo/yr)	Officially Required Years for Graduation
(Example) Undergraduate Education (Faculty/department)	Kyoto university, F Japa	<u>-</u>	ΚX	04/2021 - (mo/yr) -	-03/2023 - (mo/yr)	4
Elementary education				(mo/yr)	(mo/yr)	
Secondary education				(mo/yr)	(mo/yr)	
Higher education				(mo/yr)	(mo/yr)	
Undergraduate education				-	_	
(Faculty/department)				(mo/d/yr)	(mo/d/yr)	
Graduate education				-	_	
(Faculty/department)				(mo/d/yr)	(mo/d/yr)	
Expected date of comeducational program	Month	/ Day	/ Year	-		

10. EMPLOYMENT RECORD

Name of company/organization	Period: from – until (mo/yr)
	_
	_
	-

^{*}Print all forms on A4 white paper, single-sided.

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GRADUATE SCHOOL OF GLOBAL ENVIRONMENTAL STUDIES KYOTO UNIVERSITY IEMP ENTRANCE EXAMINATION FOR DOCTORAL PROGRAM IN DECEMBER 2022

APPLICATION FORM

Photograph (4.0 cm x 3.0 cm)

	DATE OF		/	/				
A	APPLICATION	Month	Day	Year				
		In KATAKAN	A*:					
				/				/
2. N	IAME	Family	(In capital letters/	In Kanji if applicab	ole)	First (Only	initial capitalized/In K	anji if applicable)
		F "	ŒTI:			0		
3 Г	DATE OF BIRTH	Full na	me (Fill in exactly	as appeared on you			\	
	GENDER	Month	/ Day	/ Year		gender: () Male / ()	Female
4. N	NATIONALITY	- Tondi	24)					
5. 0	CONTACT DETA	AILS						
	Current or hom	e						
	address							
	Phone							
	E-mail						<u>@</u>	
			$\Box A_1$	pril, 2023				
-	ENROLLMENT PERIOD		☐ October, 2023 (☐ Apply for MEXT special scholarship program in					
F	LKIOD		GSGES)					
7. S	TUDY AREA A	ND SUP	ERVISOR					
		1st Choice: Doctoral program in						
	Choice of Prog	ram(s)	2 nd Choice: Doctoral program in					
	Study area							
	Supervisor's na	ame						
8. S	CHOLARSHIP							
N	Vame of scholarship)						
program / sponsor								
Period of scholarship		From	n /		to	/	(mo/yr)	
Amount of scholarship						/month		
9.HONORS (if applicable)								
Awards and honors received to date and/or score ranking								
in your previous academic								
p ₁	ogram							
10.	Examination fee		ata i fin		<u>□Pa</u>		☐ Will pay	
10. Danimation for		*Applic	cation will no	t be c	ompleted v	vithout paymen	t by the deadline.	

^{*}KATAKANA is one of the Japanese alphabet expressing how to read the foreign names in Japanese pronunciation.

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11. EDUCATIONAL BACKGROUNI	11.	EDUC	ATIONAL	BACK	GROUNI
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	Name of s	chool/institution		Period: from – ur (mo/yr)	Officially Required Years for Graduation
(Example) Undergraduate Education (Faculty/department)	=	ty, Faculty of XX Japan	XXX	04/2021-03/202 (mo/yr) (mo/y	- 4
Elementary education				(mo/yr) (mo	/yr)
Secondary education				(mo/yr) (mo	/yr)
Higher education					/yr)
Undergraduate education (Faculty/department)				(mo/d/yr) (mo/d	/vr)
Graduate education (Faculty/department)				(mo/d/yr) (mo/d	
Expected date of comeducational program (Month	/ Day	/ Year	

Kyoto University Student ID number:
*For applicants who are currently enrolled at, or enrolled in the past at Kyoto university
Admissions Assistance Office (AAO) ID number:
*Only for those who have graduated, or expect to graduate, from an overseas university

12. EMPLOYMENT RECORD

Name of company/organization	Period: from – until (mo/yr)
	_
	_
	_

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13. GPA (Only for those applying for the MEXT special scholarship program)

To calculate your GPA, fill in the below table with your academic record of the course (or its equivalent) which you are currently enrolled in. If you are not currently a student, use a record of the school you graduated from last. The academic record must be of regular courses/programs; grades of non-regular courses/programs such as research student and Japanese language schools must be excluded.

Grade	Point	Credits	Grade Points (Point multiplied by credits)
Outstanding / Excellent (Score:80-100)	3		
Good (Score:70-79)	2		
Fair (Score:60-69)	1		
	Total		

^{*}Grades which are not in the above table (such as "Pass/Fail," "Certified", or "Approved") must be excluded.

GPA: total of grade points divided by total credits**	
**Roun	ded down to two decimal places

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GRADUATE SCHOOL OF GLOBAL ENVIRONMENTAL STUDIES KYOTO UNIVERSITY FOR DOCTORAL PROGRAM IN DECEMBER 2022

applicant ID or administration use only.	

LETTER OF RECOMMENDATION

Pleas	se fill in the upper pobe recommending year.	ortion of this page	e (your name, address and e-mail) and give it to the person who
Nam	e of applicant:		
(F	amily)	(First)	(Middle)
Addı	ess:		
E-ma	ail address:		
			MMENDING PARTY o the applicant in a sealed envelope, signed across the envelope
Fam >	iliarity with the ap What is your relati		pplicant? Teacher/Professor Other
>	How long have yo	u known the appl	icant? years months
>	How often do you	meet the applican	nt?
\triangleright	Please use the space	ce below for furth	er explanation of your interactions with the applicant.

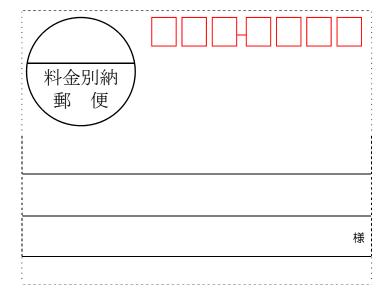
^{*}Print all forms on A4 white paper, single-sided.

(Form 2)						Page 2
Please provide a please include an supervised.						
Please comment of that you may feel at						ther remarks
(If necessary, please wr	rite on a separat	te sheet and a	ttach it to th	is form)		
Appraisal Please make an apprais comparison with other						applicant in
	Outstanding (Top 5%)	Excellent (Top10%)	Good (Top Third)	Fair (Middle Third)	Poor (Bottom Third)	Unable to judge
Intellectual ability					Tilliu)	
Analytical ability						
Ability in oral expression						
Ability in written expression Ability to work with others						
Persistence/ drive						
Originality/ creativity						
Overall Recommendati Strongly recommending Name of recommending	d □ Recomme					
Position/Title:						
Affiliation:						
Address:						
Telephone number:]	Fax number:				
E-mail address:						
Giamat C	1:		D-4- (1	/ / /	_	
Signature of recommending party			Date (month/day/year)			

^{*}Print all forms on A4 white paper, single-sided.

Address label	< Name	
I LUUII COO IUDCI	Traine	

For applicants residing in Japan: Fill out the form below with the address where you will receive the documents for enrollment procedure.



^{*}Print all forms on A4 white paper, single-sided.