

If you are already enrolled in The University of Osaka, enter the number here.

Student ID No.								
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FY( ) Application for Admission for  
Graduate School of Information Science and Technology, The University of Osaka  
Master Course –Selection for Information Technology Special Course in English, December

Attach your  
photo file here.

(Front upper body, no  
hats, single person  
taken within the past 3  
months)

Please leave blank in the fields with \*.

Name of preferred supervisor you have contacted (Note 1)				*	*
Preferred major (Department)					
Name		Gender		Citizenship	
Date of birth		Day    Month    Year			
For international students		<input type="checkbox"/> Japanese government scholarship student		<input type="checkbox"/> Foreign government- sponsored student	
Application qualification	(Select the corresponding number from “3. Admission Requirements” in Application Guideline.)				
	Last school attended				
	Date of graduation or expected graduation Day                      / Month                      / Year				
Contact Addresses	Current address	Address			zip code
		Phone			Mobile
		Email address			
	Home country (Note 2)	Name			Relationship
		Address			zip code
		Phone			
Resume					
	Period			School/institution	
Academic history (Note 3)	From	to			
	From	to			
	From	to			
	From	to			
	From	to			
Professional experience (if applicable)	From	to			
	From	to			
	From	to			
TOEIC/TOEFL/IELTS score		TOEIC score		Test date	
		TOEFL score		Type(iBT, PBT)	
		IELTS score		Test date	

- Note 1) All applicants must contact the expected academic supervisor of the department they wish to enter to obtain their confirmation.
- 2) One additional contact information in the applicant's home country requested.
- 3) In the academic history field, start entering with primary school entrance information. In addition, make sure to enter information regarding research student or student of Japanese-language school if applicable.

Academic affairs	*	Check	*
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**Examination Admission Card** (FY    )

Major name	
Examinee's number	*

**Photograph**

Attach the same photo file  
with the application.

Name \_\_\_\_\_

Graduate School of Information Science and Technology, The University of Osaka

-----Do not detach. -----

**Photo Identification Card** (FY    )

Major name	
Examinee's number	*

**Photograph**

Attach the same photo file  
with the application.

Name \_\_\_\_\_

Graduate School of Information Science and Technology, The University of Osaka

Please leave blank in the fields with \*.