

Graduate School of Information Science and Technology, The University of Osaka
Application Qualification Assessment Form (Resume)

Reception No.	*	Examinee's No.	*
Preferred major (Research field) ※Please choose one.	☐ Information Science and Technology (Information and Physical Sciences) ☐ Information Science and Technology (Computer Science) ☐ Information Science and Technology (Information Systems Engineering) ☐ Information Science and Technology (Information Networking) ☐ Information Science and Technology (Multimedia Engineering) ☐ Information Science and Technology (Bioinformatic Engineering) ☐ Pure and Applied Mathematics		
Name		Present Affiliation	Name: Address:
Date of birth	Day Month Year	Current address	Phone:
Month Year	Educational background (Start entering with high school graduation information)		
Month Year	Employment history		
Month Year	Activities and contributions in academic associations, etc. and other matters to be specially noted		

Please leave blank in the fields with *.

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Application Qualification Assessment Report (Research Result)

	Reception No.	*	Examinee's No.	*
Name		Preferred major		
		Email address		

Titles of academic achievements, publications, etc.	Journal name, volume, page number, and presentation year of presented paper (If the paper is being printed or submitted, make a statement accordingly.)	Joint author or joint presenter name(s) (Enter the names including you in the order of presentation.)
	Names of academic workshop, symposium, international conference, etc. where the paper was presented and presentation date	

(Note)

- (1) Attach the printout or copy of the academic paper, or summary or overview of presented research.
- (2) If you need more space, attach a similar format in addition to this format.
- (3) Please leave blank in the fields with *