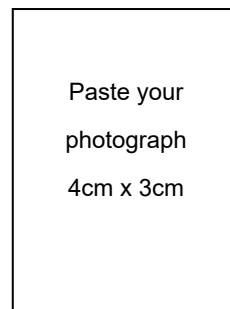


If you are already enrolled in The University of Osaka, enter the number here.

Student ID No.									
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FY() Application for Admission for
Graduate School of Information Science and Technology, The University of Osaka
Doctor Course – Special Selection in Summer for International Applicants, Admission in April

Please leave blank in the fields with *.

Name of preferred supervisor		Signature		*	*
Preferred major					
Name		Gender		Legal domicile (Prefecture for Japanese or nationality for international students)	
Date of birth		Day Month Year			
For international students		<input type="checkbox"/> Japanese government scholarship student	<input type="checkbox"/> Foreign government-sponsored student	<input type="checkbox"/> Un-sponsored international students	
Application qualification	(Select the corresponding number from “application qualification” in Application Guideline.)				
	Last school attended				
	Date of graduation or expected graduation Day / Month / Year				
Applicant	Current address		Address		zip code
			Phone		Mobile
			Email address		
Contact (Note 1)	Japan	Name			
		Contact	Address		zip code
			Phone		
	Home country	Name			
		Contact	Address		zip code
			Phone		
Resume					
Educational background (Note 2)	From		to		
	From		to		
	From		to		
	From		to		
	From		to		
Employment history (if applicable)	From		to		
	From		to		
	From		to		
For person in employment		I will [<input type="checkbox"/> resign <input type="checkbox"/> not resign] after admission.			

- Note 1) For international students, make sure to enter contact information both in Japan and home country. For other students, enter contact information in Japan only.
- 2) In the educational background field, start entering with high school entrance information. For international students, 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	*

Name _____

Photograph

1. Front upper body, no hats, single person taken within the past 3 months
2. 4 cm x 3 cm
3. Paste the same photograph as the one used for Photo Identification Card.

Shooting date:

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

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

Photo Identification Card (FY)

Major name	
Examinee's number	*

Name _____

Photograph

1. Front upper body, no hats, single person taken within the past 3 months
2. 4 cm x 3 cm
3. Paste the same photograph as the one used for Photo Identification Card.

Shooting date:

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

Please leave blank in the fields with *.

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

	Reception No.	*	Examinee's No.	*
Name		Preferred major		
		Name of preferred supervisor		
Preferred research contents (Enter specifically.)				

- (Note) (1) Please leave blank in the fields with *.
- (2) Regarding the preferred course name, please refer to the Information Science and Technology website.
URL: <https://www.ist.osaka-u.ac.jp/>

Dispatch Slip

Address is where applicant wishes to receive correspondence.

Notification of success and admission procedure will be sent to this address.

Address
Postal Code
Name
Preferred Major
Examinee's Number *

Address
Postal Code
Name
Preferred Major
Examinee's Number *

(Note) Please leave blank in the fields with *.

出願書類提出用封筒ラベル Envelope label for submission of application documents

- ① 角形 2 号封筒(240mm×332mm)をご用意してください。
Prepare an envelope(240mm×332mm).
- ② 差出人欄に記入後、ラベルを切り取り、①の角形 2 号封筒にしっかりと貼付してください。
After filling in the sender's information, cut out the label and affix it firmly to the envelope of ①.
- ③ 郵便局から簡易書留で送付してください。 Send it by simple registered mail from the post office in Japan.

✂ キリトリ線 ✂

郵便局から
簡易書留で
送付すること。
Send by simple
registered mail

5 6 5 0 8 7 1

大阪府吹田市山田丘一番五号

大阪大学大学院情報科学研究科

大学院係 行

簡易書留

※以下に試験種別を朱書きしてください

出願書類

差出人	住所 Address	〒	—
	氏名 Name		

受験票送付用封筒ラベル Envelope label for return of examination admission card

- ① 角形 2 号封筒(240mm×332mm)をご用意してください。
Prepare an envelope(240mm×332mm).
- ② 返信先の住所、氏名を記入後、ラベルを切り取り、①の角形 2 号封筒にしっかりと貼付してください。After entering your address and name in the form, cut out the label and affix it firmly to the envelope of ①.
- ③ 出願書類と一緒に提出してください。Please submit this together with the other application documents.

✂ キリトリ線 ✂



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(氏名)

(住所)

受験票
在中

受験番号

※受験番号欄は記入しないでください。

差出人：大阪大学大学院情報科学研究科大学院係

〒565-0871 大阪府吹田市山田丘 1-5

TEL : 06-6879-4508 ・ 4509 (直通)