Doctoral Course	10月入学
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Entrance Application for October 2023

			He	ad of Div./	Dept./Course:			_
				Acade	emic Advisor:			
							r professors to check	<u> </u>
	Division	n/Department	()
		Course	()
	Ap _l	olication f	or Adm	ission (I	nternation	al Students)	
To: Pres	ident, Os	aka Universi	ity					
Name in fu [in Roman		ters] *Please v	write in the	same notation	on as your pass	port		
[in Kataka	[in Katakana]							
[in Chinese	e Character	rs]						
University as ar	n internatio	onal student o	of the Doc	toral Cours		School of Eng	ineering, Osaka	
Sex	Male	Female	-	ID Number re presently				
Nationality/ Region				re presently Osaka Univ.)			Photo	
Date of Birth		(yea	r)	(month)	(day)	(4cm×3ci	
Permanent Address in Home Country							name on the bac	-
Present Address						Zin Codo		
	E-mail:					Zip Code: TEL:		
Person (living in Ja		ospective acad	emic super	visor to be n	otified in case of			
Name	1 / 1	Relation	•			Address		
E-mail :					TEL:			
Person (living in H	Iome Coun	try) to be notif	ied in case	of emergence				
Name		Relatio			•	Address		
E-mail:					TEL:			

[⟨]Notes⟩
•Proper nouns should be written in full, not abbreviated.

^{• *} Do not fill in.

Examination Number	*

			Educat	tional Back	ground					
C1::::	Name of School			Period of Attendance		ndance	Degree	Required		
Classification	Addr	ess of School	l (City, Co	untry)	(yy	yy/mn	n)	Number of Years	Held	Years of Study
Elementary School					From To	/		years		year
Lower and Upper Secondary School					From To From To	/ /		years		year
Undergraduate Level					From To	/		years	Bachelor Master Other	year
Graduate Level					From To	/		years	Bachelor Master Other	year
				То	tal Vaar	o of S	chool	years	Bachelor Master Other ()	yeai
						CHOOL			year	
Research Student Japanese Language	School and	Faculty Name	From To From To	f Attendance / / /	e (yyyy/m	~ ~ ~	Os If you Profici	tach a proof e NOT a res saka Univers have ever take tency Test" or	Details f of enrollment search student sity. n "Japanese Lan "Examination for	guage r Japanese
School Other				/			State in co	a copy of your any experie	results. ence of study luding Japan)	ing abroad
			Emp	loyment H	istory					
Name and Ad of Organization	Name and Address of Organization Period of Employment (yyyy/mm)			ition			Тур	e of Work		
		~	,							
		~	,							
		~								

	Examination Number	*
Research Interests (after enrollment at Osaka University)		
Research Achievements		
(List your research papers and publications, if any. Specify the		
and date of publication of each paper. If you don't have any, sp	pecify what you have lea	arned so far.)
		1
		1
		1

Japanese Language Proficiency: Self-evaluation. Select one that applies.					
	Excellent	Good	Fair	Poor	Notes
Reading					
Writing					
Speaking					
Listening					

Foreign Language Proficiency: Self-evaluation. Select one that applies.					
	Excellent	Good	Fair	Poor	Notes
English					

Admission Ticket (2023)

Division/ Department	
Course	
Examination Number	*

Name:

[International Students]

Graduate School of Engineering, Osaka University

Graduate School of Engineering, Osaka University

Photo

(4cm×3cm) Write your name on the backside.

Doctoral Course

Note) You must bring this Ticket when you take the examination. Also, be careful not to lose this Certificate until your enrollment. For details on the entrance examination, please contact your Division/Department (Course) office or academic advisor.

	Photo Card (2023)	
	Thoto Cara (2023)	
Division/ Department		
Course		
Examination Number	*	Photo
Name :		(4cm×3cm) Write your name on the backside.

Admission for October 2023

•* Do not fill in.

*No need to submit if you live abroad or if you are a present student of School/Graduate School of Engineering, Osaka University.

Labels for sending documents to the applicant

- This label is to address the envelope to send notification of acceptance, enrollment documents and others.
- Fill in applicant's postal code/address in Japan, name and major/course choice on all labels. Number is NOT needed.
- Should there be any changes in label's information after submission, contact Admission section immediately.

(Address in Japan)		(Address in Japan)
(Name)	様	(Name) 様
(Division)		(Division)
(Course)		(Course)
(Number)		(Number)
大阪大学工学研究科 Admission Section, O University TEL: 06 ————————————————————————————————————	GSE, Osaka	【差出人】 大阪大学工学研究科教務課入試係 Admission Section, GSE, Osaka University TEL: 06-6879-7228
(Name)	様	(Name) 様
(Division)		(Division)
(Course)		(Course)
(Number)		(Number)
大阪大学工学研究科表 Admission Section, (University TEL: 06	GSE, Osaka	【差出人】 大阪大学工学研究科教務課入試係 Admission Section, GSE, Osaka University TEL: 06-6879-7228