

Admission Application for the University of Aizu

Research Student for Academic Year 2018

Applicant No.	*			<p style="text-align: center;">Attach Photo</p> <p>Front upper body photo without background, taken within 3 months of the date of submission.</p> <p style="text-align: center;">(4 cm × 3 cm)</p>
Name	Seal / Sign			
Date of Birth	(Year) (Month) (Day)	Gender	Male • Female	
Permanent Address				
Current Address	<div style="display: flex; justify-content: space-between;"> (Postal Code) (Phone) (Fax) </div> <div style="display: flex; justify-content: space-between;"> (e-mail) </div>			
Admissions Qualifications	<ul style="list-style-type: none"> • Graduated / Expected to graduate _____ University on (Y/M/D) ____ / ____ / ____ • Other 			
Research Duration	<div style="display: flex; justify-content: space-between;"> (Y/M/D) (Y/M/D) </div> From ____ / ____ / ____ to ____ / ____ / ____ (____ months)			
Research Subject				

Notes

1. Do not fill in the column marked with a “*”.
2. Attach a proof of payment of the application fee to the back of this form.

<p>I consent to serve as the Research Advisor for the above-mentioned individual if the individual is admitted to the Undergraduate School as a research student.</p> <p>Date (Y/M/D) ____ / ____ / ____</p> <p style="text-align: right;">Faculty member to be assigned _____ Seal / Sign</p>

<Proof of payment>

(Paste the document certifying payment of application fee here.)