**AY2023 The University of Aizu**

**Spring Vietnam Internship Program**

* this program, the participants will receive student subsidies, however there is also his/her own expenses. In addition, if a student withdraws of his/her own volition after the payment of the Student Support, related expenses may be charged. Please also check the guidelines before applying.

Photograph

This application form will also be used as a basic document for travel if you are accepted.

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| --- | --- |
| Application Date | 　　／　　　　　　／　　　　　　　 |
| NameGrade・Student ID | （ UG ／ MS ）Grade：Student ID： | 　　Gender |
| M　／　F |
| Date of Birth | 　　　　　　　　(MM)／　　　　　　　(DD)／　　　　　　　(YYYY) |
| Blood Type | (Rh , if you know) |
| Contacts(Your information) | Phone number：　　　　　　　　　　　　　　　　　　　　　　　　　　　　E-mail：　　　　　　　　　　　　　　　　　　　　　　　　　 Address：〒　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　 **※Be sure your E-mail address available.** |
| Emergency Contacts（Parents, etc.） | Name: Relationship with the student: Phone number：　　　　　　　　　　　　　　　　　　　　　　　　　　　　E-mail：　　　　　　　　　　　　　　　　　　　　　　　　　 Address：〒　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　　  |
| Underlying Diseases(該当する□にチェックを入れる) | □Yes（Disease names　　　　　　　　　　　　　　　　　　　　　　　　）□No※UoA is not responsible for the development or worsening of any disease, including infectious diseases, in all of this program, regardless of whether the student has an underlying disease or not.  |
| Name of Supervisoror Homeroom Professor |  |
| First PreferenceInternship Industry※Please read the company list in this program |  |
| Second PreferenceInternship Industry※Please read the company list in this program |  |
| TOEIC Score etc. |  |
| １．Describe what you would like to gain from this internship.  |
| ２．Describe what you would like to learn about Vietnam |
| ３．Write your experience of extracurricular activities such as Hackathon, international exchange activities, system developments, etc.

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| Year | Month | Content and Name of Activity |
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| ４．Write your overseas experience (where, how long, activity content, etc.) |
| ５． Applicants must attend the interview selection (in English) . Please tell us your preferred date. (Please indicate A, B, and C in order of preference. Please select more than one option)Wednesday, December 6: A 12:40-13:20; B 13:20-14:20; C 14:20-15:20;1st choice（　　　　）　2nd choice（　　　　）　3rd choice（　　　　） |
| ６．How did you get the information of this program?□ Read an E-mail □ Looked at the poster and digital signage □ Participated in the information session　　　　□ Contacted SGU office□ Others（　　　　　　　　　　　　　　　　　　　　　　　） |
| I hereby promise the details stated here are true and correct. Signature： Date： |

＜Note＞ ○ In case the writing space is not enough, you can add the page as necessary.