October 2020 Admission Hiroshima City University Graduate School Graduate School of International Studies Master's Degree Program Entrance Application Form

Exam category		Entra	Entrance Examination for Applicable International Students Living Abroad						
Applicant name	Roman character								Sex 1 Male
7 ipplicant name	Native language								2 Female
	Year	Month	Day					<u> </u>	
Birthdate				Nationality	y				
Desired supervisor, etc.	Faculty member name ☐ I consulted with my desired supervisor in advance.								
	Research area				Subject				
Type of thesis written	Master's Thesis or Research Report								
Type of exam submitted [This submission is not required for persons who are native speakers of Japanese or English.]	Japanese or	Name of	exam						
Academic background		University			Dept	Faculty			Major/Course
				YYYY/	MM/	DD	Graduated or	Expect	to graduate
Address	Address to send	Postal code:			Phone				
	notification of acceptance, etc.								
	T.	Postal code:			Phone				
	Emergency contact information								
	E-mail address								

ATTENTION

- 1. Leave the Examinee number blank.
- 2. For the Roman character section of Applicant name, enter your name (in block letters) as spelled on your passport or the like.
- 3. For the Type of thesis written space, select the corresponding item.
- 4. In the Desired supervisor, etc. space, enter the name of the faculty member whom you would like to have guide your research, as well as that faculty member's research area and subject. Consult with your desired supervisor in advance and then place a check in the box.
- 5. For the Type of exam submitted space, referring to page 6 of the Student Application Guidelines, select the corresponding item and then fill in the name of the exam submitted for your application.