

愛媛大学交換留学生(特別聴講学生・特別研究学生)入学願書 (2019年 後期入学用)

Ehime University Exchange Students (Special Auditing and Special Research students) Application Form
(For 2019 Second semester enrolment)

* Please type or print clearly. 丁寧な字ではっきりと書くこと。

Applicant's Information (申請者情報)		
ふりがな ※必須		
Name in your language (氏名母国語表記)		
Name as listed on passport (パスポート記載氏名)	_____ 姓(FAMILY) 名(Given) (Middle)	Photo (写真) 3cm × 4cm
Nationality (国籍等)		Gender (性別) <input type="checkbox"/> Male (男) <input type="checkbox"/> Female (女)
Date of birth (生年月日)	_____ / _____ / _____ (yyyy/mm/dd)	Marital Status <input type="checkbox"/> Single (未既婚の別) <input type="checkbox"/> Married
Current address (現住所)		
	Tel: _____	Fax: _____
	email: _____	

Your status in Home University (在籍大学における身分)		
Name of home university (在籍大学)		
Faculty/School (在籍学部/学科)	Address:	
Date of admission (入学年月)	_____ / _____ / _____ (yyyy/mm/dd)	Major (学科/専攻)
Date of admission (入学年月)	_____ / _____ / _____ (yyyy/mm/dd)	Expected Date of Graduation/Completion (卒業/修了予定年月日)
Current status (在籍年次)	<input type="checkbox"/> Undergraduate (year _____) <input type="checkbox"/> Master Course (<input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> Other ___ year) <input type="checkbox"/> Doctoral Course (<input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Other ___ year)	
Your major academic field (主専攻分野)		
The University/college y ou have graduated (出身 大学)		

Study Plan at Ehime University (愛媛大学での学習計画)

(1) 希望留学期間 I am applying for:

- 後期 Fall Semester (October - March)
 後期+前期 Fall + Spring Semester (October - September)
 その他 Other _____

(2) The field of study at Ehime University. (愛媛大学で希望する学習分野)

(3) Study plan at Ehime University. (学習計画)

Give an outline of your study plan at Ehime University.

【If you are a master student (大学院生の場合): Write your research theme here (研究テーマ)】

Language Ability (語学力)			
Japanese (日本語)	Excellent	Good	Fair
English (英語)	Excellent	Good	Poor
Japanese language qualification (日本語能力試験)	<input type="checkbox"/> N1 <input type="checkbox"/> N2 <input type="checkbox"/> N3 <input type="checkbox"/> N4 <input type="checkbox"/> N5 <input type="checkbox"/> 未受験(Haven't taken it)		
English language qualification (英語能力試験)	TOEIC(), TOEFL(), IELTS(), Other()		
Japanese language study background (日本語学習歴)	Name of institution attended (学習機関の名称)		
	Period of study (学習期間)	_____ Y(年) _____ M(月)	_____ Y(年) _____ M(月)

<p>Special Notes</p> <p>If you have any special requirements, please describe them. Do you need special physical support? If so, what kind?</p> <p>(特記事項 何か大学への希望があれば、記載してください。修学上特に支援が必要な場合、具体的に記述してください。)</p>	
---	--

I hereby state that all the above information is true.

Signature of Applicant:

(出願者署名)

Date (日付) : _____

愛媛大学記入欄 : Ehime University Official Use
指導教員(Supervisor):

聴講希望科目 Class Request

Semester __ (__ 学期 履修科目)	Semester __ (__ 学期 履修科目)
1	1
2	2
3	3
4	4
5	5
6	6
7	7