

Date:

To the Dean of the School/

Graduate School of Economics

Name:

(Hiragana)

Name:

(Chinese Characters)

Name:

(English Alphabet)

Date of Birth:

Application Form for Research Students

I hereby apply for admission as a research student as indicated below.
Your kind consideration will be greatly appreciated.

1. Research Theme

2. Term of Research From: day month year

To: day month year

3. Supervisor's Signature:

RESUME

Date:

Name (Hiragana)		Nationality	<div style="border: 1px dashed black; padding: 10px;"> <p>Photo 4cm high x 3cm wide</p> </div>
Name (Home Language)		Sex (Male/Female)	
Name (English Alphabets)			
Date of Birth	Day Month Year	(Age:)	
Current Address (Postal code:)		Tel	
		E-mail	
Address for receiving Admission Permit (Leave blank if same as above)		Tel	
		E-mail	

1. Education Background

Educational Institution	Education History	
Primary School	From	To
	Diploma or Degree awarded:	
Middle School	From	To
	Diploma or Degree awarded:	
High School	From	To
	Diploma or Degree awarded:	
University	From	To
	Major, Diploma or Degree awarded:	

2. Employment Record

Day Month Year	Details (Name of the Organization, position and type of work)
From	
To	

From	
To	
From	
To	

3. Japanese Learning Background

Day Month Year	Institution Name
From	
To	
From	
To	
From	
To	

4. Defrayer's/sponsor's Information and Applicant's Future Plan

Defrayer's/Sponsor's information	
Term you wish to study in Kyushu University	<input type="checkbox"/> Only a research student term <input type="checkbox"/> Through to the completion of master's degree program <input type="checkbox"/> Through to the completion of doctoral program

5. Other personal information

Favorite Subjects	Health Condition
Hobbies	License or qualification
Favorite Sports	Other

6. Family members (Please mark "○" if your family member is residing in Japan)

Name	Relationship	Age	Name	Relationship	Age

PHYSICAL EXAMINATION CERTIFICATE

Name:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Receipt Number	
Date of Birth:		Nationality:		*Office use only	
Current Address:					
Height: _____ cm		Weight: _____ kg			
Eyesight: (R) _____ (L) _____					
With glasses: (R) _____ (L) _____					
Hearing: (R) <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal		(L) <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal			
Speech: <input type="checkbox"/> Normal <input type="checkbox"/> Abnormal					
If yes, please describe					
Functional disorders of extremities:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please describe					
Other illness or disorders:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please describe					
Past illness:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, please describe					
Urinalysis: Protein		—	+	++	+++
Sugar		—	+	++	+++
Urobilinogen		—	+	++	+++
HBs: Antigen		—	+		
Antibody		—	+		
Blood Pressure:		/		mmHG	
Blood type:				, RH:	
Chest X-ray: <input type="checkbox"/> Direct <input type="checkbox"/> Indirect					
Please comment on condition of applicant's lungs, giving date of tests:					
Please describe in detail any disease (chronic or other) or physical handicaps:					

Please indicate past illness:

Are there any physical or mental conditions that may limit the student's ability to study?

Yes No

Does the student have any food or drug allergies? If "Yes", please describe.

Yes No

Do you consider the student to be in adequate mental and physical health for full and successful participation in the study abroad program?

Yes (Adequate) No (Inadequate)

If "No", please describe the reason.

I diagnose, that the applicant's healthy and physical condition are:

Excellent Good Fair Poor

I hereby certify the above diagnosis

Physician's Signature:

Name of Hospital:

Address:

Date of Examination:

(Hospital Stamp)

Letter of Guarantee

Date:

Guarantor

Name (Chinese characters)	Name (English Alphabet)	Date of Birth	Sex (Male/Female)	Nationality	Relationship to Applicant

Current Address		Postal Code	Phone Number
Country	Detailed Address		

As the applicant's guarantor, I hereby certify that I take full responsibility to pay any and all costs resulting from the applicant's misconduct, tuition fees, and school expenses, and any other debts incurred during his/her attendance period at your university.

Applicant

Expected Enrollment Date	School/Graduate School of Economics

Name (Chinese characters)	Name (English Alphabet)	Date of Birth	Sex (Male/Female)	Nationality

Current Address		Postal Code	Phone Number
Country	Detailed Address		

- Note:
1. In principal, a guarantor must be a parent, or a brother or sister of the applicant.
 2. The change of guarantor should be reported quickly to the dean of the school/gruaduate school.
 3. This form must be filled out in the guarantor's own handwriting.

KYUSHU UNIVERSITY

How to make the Payment for the Application Fee by Credit Card, Union Pay, and Alipay.

24 hours a day, 365 days a year, you can pay anytime! Easy, Convenient and Simple!

You can pay the Application Fee by using Credit Card, Union Pay, and Alipay.



Access

<https://e-shiharai.net/english/>



Online Transaction

1. Top Page

Click "Examination Fee".

2. Terms of Use and Personal Information Management

Please read the Terms of use and Personal Information Management.

Click "Agree" button located in the lower part of this page if you agree with these terms.

Click "Not agree" button located in lower part of this page if you do not agree with these terms.

3. School Selection

Select "Kyushu University (Undergraduate Schools)" or "Kyushu University (Graduate Schools)."

4. School Information

Read the information carefully and click "Next".

5. Category Selection

Choose First to Fourth Selection and add to Basket.

6. Basket Contents

Check the contents and if it is OK, click "Next".

7. Basic Information

Input the applicant's basic information.

Choose your credit card and click "Next".

Paying at Credit Card

Input Credit Card Number (15 or 16-digits), Security Code and Expiration date.

All of your application information is displayed. Check and Click "Confirm".

Click "Print this page" button and print out "Result" page.

Paying at Union Pay, Alipay

Follow the onscreen instructions to complete the card payment.

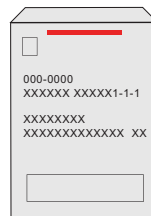
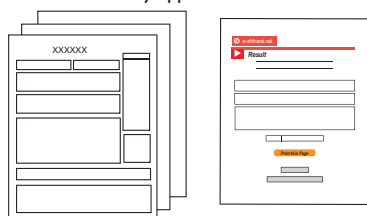
Please click the "Application Results" button in the upper part of this site (e-shiharai.net).

Please write down the "Receipt Number" given when you complete your application, and enter your "Payment Method", "Receipt Number" and "Birth Date". Please make sure your printer is ready.

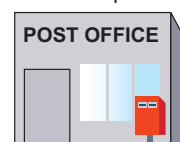
Please print out the "Payment Inquiry - Inquiry result" page.

Enclose the printed "Result" page in an application envelope with other necessary application documents.

Necessary application documents



Mail it via post



[NOTICE/FAQ]

- You can make a payment anytime, during the payment period mentioned in the application instructions. Please refer to the application instructions and complete payment in time.
- Please complete payment by 11:00 pm Japan time, on the last date of the payment period.
- Please note that refund is not possible once you have made a payment of Application fee.

- A fee is added to Examination fee. For further info, please visit our website.
- It is possible to use a card which carries a name different from that of the applicant. However, please make sure that the information on the basic information page is that of the applicant him/herself.
- If you did not print out "Result" page, you can check it later on Application Result page. Please enter "Receipt Number" and "Birth Date" to redisplay.
- Please directly contact the credit card company if your card is not accepted.

For questions or problems not mentioned here, please contact:

E-Service Support Center Tel : +81-3-3267-6663 (24 hours everyday)