

## Admission Application for the University of Aizu Graduate School Research Student for Academic Year 2021

Applicant No.	*			Attach Photo  Front upper body photo without background, taken within 3 months of the date of submission.  (4cm × 3cm)
Name	seal / signature			
Date of Birth	(Year)      (Month)      (Day)	Gender	Male • Female	
Permanent Address	(Postal Code)			
Current Address	(Postal Code)			
	(Phone)			
	(E-mail)			
Admissions Qualifications	• Completed / Expected to complete the graduate school master's program at _____ University on (Y/M/D) ____ / ____ / ____ • Other			
Research Duration	(Y / M / D)	(Y / M / D)		
	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.

I consent to serve as the Research Advisor for the above-mentioned individual if the individual is admitted to the Graduate School as a research student.

Date (Y/M/D) \_\_\_\_\_

Expected Research Advisor \_\_\_\_\_ seal / signature

<Proof of payment>

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