

Application Form (English Program)

Doctoral Program in Library, Information and Media Studies
 Graduate School of Library, Information and Media Studies, University of Tsukuba

1. Full Name (1) In your native language _____ , _____ , _____ <div style="display: flex; justify-content: space-around; width: 100%;"> Last Name First Name Middle Name </div> (2) In English (Must be identical to the name (in Roman alphabet) printed on your passport) _____ , _____ , _____ <div style="display: flex; justify-content: space-around; width: 100%;"> Last Name First Name Middle Name </div>		Photo 4cm × 5cm (1.6"×2")	
2. Nationality	3. Date of Birth _____ / _____ / _____ Month Day Year Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Native Language
4. Current Status (Name and Address of University or Employer) <input type="checkbox"/> Student <input type="checkbox"/> Employed Tel: <input type="checkbox"/> Unemployed Fax: <input type="checkbox"/> Other E-mail:			
5. Corresponding Address Tel: Fax: E-mail:			
6. Contact information in case of emergency (Please use address other than the one state above) Tel: Fax: E-mail:			
7. Name and address to whom the examination's results should be sent (Enter only if different from the address given in #5) Tel: Fax: E-mail:			
8. Name of prospective academic advisor (Faculty of Library, Information & Media Science, University of Tsukuba)			
9. Research Topic			

10. Educational Background

Education	Name and address of school, major and title of diploma or degree awarded	Dates of entrance and graduation [Number of years attended]	Standard Duration of Program
Primary Education Primary School	Name Address	From ____ Yr., ____ Mon. To ____ Yr., ____ Mon. [_____ Years]	____ Years
Secondary Education Lower Secondary School	Name Address	From ____ Yr., ____ Mon. To ____ Yr., ____ Mon. [_____ Years]	____ Years
Upper Secondary School	Name Address	From ____ Yr., ____ Mon. To ____ Yr., ____ Mon. [_____ Years]	____ Years
Higher Education Undergraduate School	Name Address Diploma or degree awarded	From ____ Yr., ____ Mon. To ____ Yr., ____ Mon. [_____ Years]	____ Years
Graduate School	Name Address Diploma or degree awarded	From ____ Yr., ____ Mon. To ____ Yr., ____ Mon. [_____ Years]	____ Years
Total number of years of education received		_____ Years	____ Years
Periods of interruption of studies, if any. Please indicate the reason. From _____ Yr., _____ Mon. ~ _____ Yr., _____ Mon. (_____) From _____ Yr., _____ Mon. ~ _____ Yr., _____ Mon. (_____)			

11. Employment records, beginning with the most recent position, if applicable.

Name and address of employer	Period of employment	Position	Type of work
	From _____ To _____ ~		

I hereby submit my application for admission to the University of Tsukuba.
I understand that my application will be deemed invalid, if there is found to be fraud or deception in the submitted application documents.

Name of Applicant (Print)

Signature

Date

Research Plan

Doctoral Program in Library, Information and Media Studies
Graduate School of Library, Information and Media Studies, University of Tsukuba

Name of Applicant	
<p>Describe your reasons for applying and your study plan in English (1,000 words maximum). If necessary, you may describe additional information on a separate A4/letter size sheet and attach it to this form.</p>	

Form 3

Certificate of Payment of Examination Fee
Doctoral Program in Library, Information and Media Studies
Graduate School of Library, Information and Media Studies, University of Tsukuba

Name of Applicant	
-------------------	--

Please attach the payment receipt here as indicated in Section 7-1 of the Guideline.