October，2023　Enrollment

Master’s Degree, Graduate School of Engineering, Nagasaki University

Application Form (Examination for International Students)

|  |  |
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| Admission No. | ※ |

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| To the President of Nagasaki University  I wish to enroll for the Master’s Degree, Graduate School of Engineering, Nagasaki University and hereby enclose the prescribed documents and Entrance Examination Fee.  　　　　　　　　　　　Year / Month / Day    　　　　　　　　　　　　　　　　　　　　　Name    Date of birth Year Month Day Male / Female | | | |
| Applying Department | Department of Advanced Engineering | | |
| Applying Program | Civil and Environmental Engineering Program | | |
| Expertise | Choose one subject from below by encircling it:  Structural mechanics / Soil mechanics / Hydraulics / Urban planning | | |
| Interviews and oral examinations | Choose one language used in the interviews and oral examinations from below by encircling it:  Japanese / English | | |
| Current Address | 〒(Zip/Postal code)  Mail　　　　　　　　　　　　　　　　　　　　　　　TEL: (　　　)　　　- | | |
| Graduated University /  Department | Country  Year Month University Department    Graduated・Expected to graduate | | |
| Application Eligibility  (Circle the relevant number) | (1)・(2)・(3)・(4)・(5) | Nationality |  |
| Academic Advisor |  | | |

Notes:

　1. Do not fill in ※ marked box.

　2. Provide the name as registered or indicated on your resident card.

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| --- | --- | --- | --- | --- | --- |
| Personal Records | | | | | |
| Educational  Background | Name of the educational institutions | Time of Study | Date of Enrollment / Graduation | | Qualification  (Degree) |
|  | Year(s) | Enrollment Year Month  Graduation Year Month | |  |
|  | Year(s) | Enrollment Year Month  Graduation Year Month | |  |
|  | Year(s) | Enrollment Year Month  Graduation Year Month | |  |
|  | Year(s) | Enrollment Year Month  Graduation (Expected) Year Month | |  |
|  | Year(s) | Enrollment Year Month  Year Month | |  |
|  | Year(s) | Enrollment Year Month  Year Month | |  |
| Employment  History | Place of Employment (Job Title) | Period of employment | | | |
|  | Year(s) | From To  Year Month　　～ Year Month | | |
|  | Year(s) | From To  Year Month　　～ Year Month | | |
|  | Year(s) | From To  Year Month　　～ Year Month | | |
| Awards | Details | | | Year Month | |
|  | | |  | |
|  | | |  | |
|  | | |  | |
| I hereby declare that the information I provide above is truthful and correct.    Year Month Day  Name (signature): | | | | | |

　　Notes:

　　　1. Please provide the details of your entire educational background, including elementary school.

2. Please write “N/A” if you have no history of employment, awards or convictions.

3. The university reserves the right to terminate the enrollment in the event of discovering any false information in

this document.