

Application Form for GSC Exchange Program

As of Year / Month / Day

① Desired School

	Name of Partner School	Study period (Year/Month)
		from / to /

② Applicant Information

Student ID No *First 8 digits	3	5							Program/Grade	MA・MBA・PhD year		
Name(katakana)									Name(alphabet)			
Name(kanji)									Nationality			
Date of Birth	year/month/day / /								Age		Gender	M・F
Language Test Score *circle the type of Test	Test	TOEFL *iBT, PBT, CBT		TOEIC		IELTS		GMAT		GRE		
	Score									%		
	Acquisition Date	Year / Month		Year / Month		Year / Month		Year / Month		Year / Month		
Present Address	〒 — E-mail:											
	Tel: () Mobile: ()											
Emergency Contact	Name: (relationship:) Tel(home): ()											
	〒 — Mobile: ()											
	E-mail:											
Medical History past 5 years												
Current Scholarship Information	Name of Scholarship:								Permission from the Scholarship Foundation		Yes / No	
	Receiving period: / / ~ / /											

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③Educational Background *Undergraduate to Present

- List, in chronological order, all schools from Undergraduate School

School	Department / Major	Period (Year/Month)
		From / to /
		From / to /
		From / to /
		From / to /

④Professional Background

- List, in chronological order, all full-time positions including internship
- For “Type” column, please fill the letter “F” for employment and “I” for internship.

Type	Company / Organization Name in full	Job Title	Period (Year/Month)
			From / to /
			From / to /
			From / to /
			From / to /
			From / to /

⑤Signature of your project advisor

- Please consult with your project advisor about your Zemi plan during your absence due to the exchange program.
- If you don't belong to any Zemi yet, the signature is not necessary.

Signature of the Project Advisor : _____ 印