Application for Studying Abroad

Date of Submission: _____ (Year) _____ (Month) _____ (Day)

Att.: Dean of the School of Culture, Media and Society / Humanities and Social Sciences, Waseda University

Student

*Please make sure that the student signs and affixes his/her own seal.

| School | School of | School Year |
|-------------------------------------|--------------|-------------|
| Theoretical Configuration/Course | | |
| Student ID No. | | |
| Name | | Seal |
| Address | Postal Code: | |
| Phone No. | | |

Guardian

*Please make sure that the guardian signs and affixes his/her own seal. Refrain from using the same seal as the student's.

| Name | Seal |
|-----------|--------------|
| Address | Postal Code: |
| Phone No. | |

I hereby request permission for studying abroad as follows.

1. Name of University / Institution:

| | (Country: | |
|---|---|-------|
| 2. Period of Study Abroad: | | |
| <u>1 year/1 semester</u> from <u>Spring/Fall</u> Semester of AY | to <u>Spring/Fall</u> Semester of AY | |
| Expected Date of Departure from Japan: | (YYYY/MM/DD) | |
| Expected Date of Returning to Japan: | (YYYY/MM/DD) | |
| 3. Local Contact during Study Abroad | | |
| Address: | | |
| Tel: (*Please fill in if available. We will use the information abov | ye only when we can't contact you via W | aseda |

mail)

4. Traveler's insurance

Have you purchased the traveler's insurance specified by Waseda University?

Yes, I purchased it. / Yes, I will purchase it. / No, I purchased or will purchase other traveler's insurance.

(*If you purchase other traveler's insurance, please attach its details describing the coverage.)

5. Recognition of Credits Earned on Study Abroad etc.

Please choose your preference for following items. We will confirm them with you again after returning to Japan.

| A | <u>Graduation:</u> Would you like to graduate from Waseda University in four or four and half years from admission? | Yes | No |
|---|---|-----|----|
| В | <u>Recognition of Credits Earned on Study Abroad:</u> Would you like to recognize the credits earned on study abroad? (If you would like to graduate from Waseda University in four or four and half years from admission, please make sure to confirm the necessity of credits recognition yourself) | Yes | No |
| С | Handling of Years of Enrollment: Would you like to include the period of study abroad in your number of years of enrollment at Waseda University? (Please fill in only if you choose "Yes" on the question B above. In order to include the period of study abroad in your number of years of enrollment at Waseda, credits recognition is required) | Yes | No |

The following is for administrative use only.

| Remarks | Interview Date | Reception Date |
|---------|-------------------|-------------------|
| | / | / |
