

Student Exchange Program Application for Admission to Waseda University

A face-to-shoulder
(without background)
colored photo (in size
3x4cm)

Please write your name
on the back side of the
photograph.

&

Please Paste here!

A. Application Category (Please check one and fill out its all fields)

☐ Graduate School (☐ Master's level / ☐ PhD level) ☐ Undergraduate School

School you are applying for at Waseda: _____

Department of the School you are applying for: _____

Major field at Waseda: _____

Name of Prospective Academic Supervisor at Waseda: _____
(Graduate School applicants only)

B. Program Period (Please check one)

☐ April 2016 to July 2016 ☐ April 2016 to February 2017 ☐ September 2016 to February 2017 ☐ September 2016 to July 2017

As a general rule, the exchange program at Waseda University is one year duration. Therefore, if an applicant intends to attend only one semester duration, please explain the reason.

C. Home Institution Information

1. Your home institution: _____

2. Faculty/Department you belong to at your home institution: _____

3. Major field at your home institution: _____

4. At the time of application, in your home institution, you are a (please check one)

☐ Master's Degree Student ☐ PhD Student ☐ 1st (Freshman) ☐ 2nd (Sophomore) ☐ 3rd (Junior) ☐ 4th (Senior)

5. Cumulative GPA on 4.0 scale: _____ (as of the end of previous term)

*School of International Liberal Studies, School of Fundamental Science Engineering, School of Creative Science and Engineering and School of Advanced Science and Engineering, and School of Social Sciences(English based-program) applicants only

6. Expected graduation date at your home institution: _____ / _____ (Month/Year)

*Please include the period of study at Waseda in the above expected graduation day section.

D. Personal Information

1. Name:

In English: _____
(Family) (First) (Middle)

*Write your full legal name as it exactly appears in your passport

In Katakana : _____
(Family) (First) (Middle)

*This Katakana name will be used as your official name which cannot be changed later.

If you do not fill it in, it will be filled in by Waseda University and any claims afterwards will not be accepted.

In Chinese Characters (Kanji): _____

*If you are originally from an Asian countries (China, Taiwan, Hong Kong, Korea and Japan) which use Kanji, write your name in Kanji

2. Gender: ☐ Male ☐ Female

3. Date of Birth: _____ / _____ / _____

(Month) (Day) (Year)

4. Present Address (English): _____

5. Home Address (English): _____

6. Phone: _____ 7. Mobile Phone: _____

8. E-mail: _____

9. Country of present citizenship: _____

10. Are you a dual citizenship holder? ☐ No ☐ Yes (Country: _____)

11. Health:

Explain any mental or physical disabilities if you have any*.

Any information about your health concerns which you would like us to know*.

*Providing us of your health concerns will not impact selection into the exchange program.

This information will only be used for establishment of a support for you.

E. Personal History

1. Educational background (List all schools attended in chronological order):

Name of Institution (Elementary, Secondary, and Post-Secondary)	Location (City, Country)	From (month/year)	To (month/year)
Present:			(expected date of graduation)
		Total years (As of the time of application)	Years

2. Japanese Language Experience:

Name of Institution	Location (City, Country)	From (month/year)	To (month/year)
		Total years (As of the time of application)	Years

3. Japanese Proficiency (Please give your own assessment of your Japanese proficiency)

	Excellent	Good	Fair	Poor	None
Speaking					
Listening					
Reading					
Writing					

4. Native Language: _____

5. Foreign language study other than your native language or Japanese

(If your native language is not English, please fill out your English study experience as well)

Language	Institution	From (month/year)	To (month/year)

6. Occupation or work experience (if any):

Employer	Location (City, Country)	From (month/year)	To (month/year)