****

**JAPAN UNIVERSITY OF ECONOMICS**

PHOTO

4cm×3cm

taken within

6 months

**International Exchange Program**

**APPLICATION FORM**

日本経済大学　交換留学生 入学志願書

■**Period** Year: Semester: **【　】**Spring（Apr-Aug） **【　】**Fall（Sept-Feb）

■**Campus: 【　】**Fukuoka（Dazaifu） **【　】**Tokyo（Shibuya）

■**Academic Information**

Name of Home Institution:

Faculty: Department:

Major: GPA: Current Grade:

Contact Person at Home Institution

*\*Please provide contact details of your exchange advisor/coordinator at your university.*

Name: Position/Relationship:

Mailing Address:

Tel: Email:

■**Personal Information**

Title: **【　】**Mr. **【　】**Ms.

Family Name: Middle Name (If any):

Given Name:

Date of Birth: DD/MM/YYYY

Passport No: Date of Expiry: DD/MM/YYYY

Nationality: Native Language:

Home Address:

Tel: Email:

■**Language Proficiency**

●**JAPANESE**

**Have you studied Japanese Language before? 【　】** Yes **【　】** No

**If “Yes”**, for how long? years

Where at? university / Japanese weekend school / high school / self-study / language school

Please list the Japanese Language Proficiency Test level and score.

JLPT: N Score Test date: DD/MM/YYYY

●**ENGLISH**

TOEFL iBT score / TOEFL PBT score / IELTS score

Others

*\*Please also attach a photocopy of the official score report.*

■**Emergency Contact Person**

Name: Relationship:

Address:

Postal Code: Tel:

Email:

■**Education History**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Institution | Location  City, Country | Enrolled in  Graduated in | Years  Attended |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*\*Please provide details of all formal studies you have completed and those you are currently undertaking, beginning with the first year of Senior High School and ending with the last year of education.*

■**Health Information**

**Do you have any health problems/physical problems or taking any medication?**

**【　】** Yes **【　】** No

**If “Yes”, please state.** *(\*This does not affect your eligibility for the exchange program)*

**\****Please attach the separate* ***“Medical Examination Form”***

■**Accommodation in Japan**

**Please indicate your accommodation preference while studying at JUE.**

**【　】** apply for JUE dormitory\* (Fukuoka Campus only. Information sheet is available upon request)

**【　】** arrange my accommodation myself

**\**Note that there is no university-owned accommodation at Tokyo Shibuya Campus.***

***Please contact the JUE International Office for assistance.***

■**Personal Statement**

Please attach the separate **“Personal Statement”** form describing your academic interests and reasons for applying to JUE.

■**Signature of Applicant**

Your signature confirms that to the best of your knowledge, the information on this application form is accurate and complete.

Signature of Applicant Date

DD/MM/YYYY

**Home Institution Approval**

**I certify that the above student has been approved for participation in the exchange program for the following periods:**

From (month, year) To (month, year)

**Signature of Exchange Coordinator**

Date DD/MM/YYYY