	Enrollment in April 2024
	(Winter Entrance Examination)
Kyoto U	<b>Jniversity Graduate School of Advanced Integrated</b>
	tudies in Human Survivability (Shishu-Kan)
	Special Admission for International Students

Eligibility for	Q
Application	9

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\*Circle one from the above₀

## **Application Eligibility Evaluation Request Form**

Name	Last		First		Middle				
Birth Date	Year	Mont	h Day	(Age	)				
	Enter educational background from High School (Upper Secondary) onward.								
	Year/Month/Day Enrolled Year/Month/Day Graduated	Years Attended	High School Educatio	n (Upper Secc	ondary Education)				
Student	Year/Month/Day Enrolled Year/Month/Day Graduated	Years Attended	University Department Course of Study						
	Year/Month/Day Year /Month/Day	Years Attended							
History	Year/Month/Day Year/Month/Day	Years Attended							
	Year/Month/Day Year /Month/Day	Years Attended							

	Those who are currently working and those who have a work history must fill out also the section						
	below.	<u> </u>					
	Year/Month/Day						
	Start Date	Years					
	Year/Month/Day	Employed					
	End Date						
Work	Year/Month/Day Year /Month/Day	Years Employed					
History	Year/Month/Day Year/Month/Day	Years Employed					
	Year/Month/Day Year /Month/Day	Years Employed					
Address	Zip Code - Phone Number: ( Cell Phone Number:	)					
	e-mail	@					
Status at the time of Applicatio n	<ul> <li>□Undergraduate Student</li> <li>□ Graduate Student ( Year)</li> <li>□ Company Employee (E Affiliation)</li> <li>□ Researcher (Enter detai Affiliation)</li> </ul>	ls under	Affiliation	(Enter Professor's name/lab name, Place of Employment, Job Title, etc.)			
	□Other (Enter details unde	r Affiliation)					