## Akita University Graduate School of International Resource Sciences

I hereby request

Date of Birth Permanent Residence (Nationality)

	Α	dmission Applicatio	on for Non	-deg	ree Students Date (YYYY/MM/I	)D):	
To: Dean, Grad	luate School	of International Resource Scien	ces, Akita Univer	rsity		,	
		Si	gnature of Appli	cant:		(seal)	
		Si	gnature of Guara	ntor:		(seal)	
nereby request	permission	to be admitted to your graduate	school( Master's	s Course:	s • Doctoral Courses ]	) as a non-degree student.	
	* In native la						
Name	* In Roman	block letters (Family, First, Middle)	ers (Family, First, Middle)				
Date of Birth	(YYYY/MM/	/DD)	Gender		M • F	* Full-face view and upper torso; no hat may be worn; taken within last 3 months	
Permanent Residence Nationality)			L	1			
Current Address	(〒	- )		Phone r	number		
Emergency Contact mail Address		is will be used in an emergency such as or other device.	s a natural disaster, :			at you will be able to access on a	
Address to Which	Name						
Screening esults Will Be Sent nly for applicants esiding abroad	Address	(〒 —	)				
	Name				Relationship to		

	Phone number										
Emergency Contact E-mail Address	* This address will be used in an emergency such as a natural disaster, so be sure to indicate an a smartphone or other device.							ldress tha	t you will be	able to access	on a
Address to Which	Name										
Screening Results Will Be Sent * only for applicants residing abroad	Address	(〒	-		)						
Guarantor	Name						Relationsh applicai	-			
	Address	(〒	_		)	Dhana					
Educational Background	School name				Phone number Required Number of Years Schooling you have attended		Year and Month of Entrance and Completion (YYYY/MM)		1		
	Elementary	Education/Ele	ementary School				Years	From		to	
	Secondary E	Education/Low	ver Secondary Sch	100l			Years	From		to	
	Secondary E	Education/Upp	er Secondary Sch	iool			Years	From		to	
	Higher Educ	cation/Underg	raduate level				Years	From		to	
	Higher Educ	cation/graduat	e level				Years	From		to	
Employment Record	Employer				Position		Period of employment (YYYY/MM)				
								From		to	
								From		to	

Purpose of Taking Course(s)								
Courses for which you would like to apply								
Semester	Course Title	Credits	Instructor	Approval seal				