

Application Form for Seisen University, JAPAN

1 Personal Information

写 真

Photo

40mm × 30mm

■ First Name: _____

■ Family Name: _____

■ 姓名(漢字): _____ (ひらがな): _____

*If available

■ Date of Birth: Y/ M/ D/ ■ Gender: Male ☐ Female ☐

■ Nationality: _____ ■ Passport Number: _____

■ E-mail: _____

■ Address: _____

Zip Code: _____

■ Mailing Address (If different from above) : _____

Zip Code: _____

■ Home University: _____

■ Current degree program: _____ Major: _____

2 Plan of Study

■ Name of the department you wish to enroll in at Seisen University : _____

■ Term of Study: from / / to / /

■ First Language: _____

■ Japanese Proficiency: Level _____ Date of test: / /

(Attach certificate of Japanese Language Proficiency Test (日本語能力試験))

3 Contact Information in case of emergency

■ Name: _____ ■ Relationship: _____

■ Address: _____

Zip Code: _____

■ Tel: _____

I confirm that the details I have entered on this form are correct.

Signature of Applicant: _____

Date: _____

Study Plan: List of subjects you would like to study

In accepting students, Seisen determines which department is most appropriate for you to belong to, based on the subjects you choose to study and your study plan. Upon arrival, you are to consult with advisors of the department you belong to and the subjects you actually take will be decided.

■ Please write the classes you wish to take at Seisen University.

1)	
2)	
3)	
4)	
5)	
6)	
7)	
8)	
9)	
10)	
11)	
12)	

Statement of Purpose

Please state briefly the reason in Japanese why you would like to study at Seisen University .

Advance Notice

Please inform Seisen University in advance if there is anything you would like the university to take into consideration.

(e.g.) I have an allergy to milk./I sometimes have trouble sleeping due to anxiety./ Please indicate any special support needs, such as mental health or other illnesses, that you would like Seisen University to know about in advance.

*Your answers do not affect the assessment.