*	University Use	受験番号	K 1
		学生番号	K 2 5

## **Application Form for Sophia University Graduate Program Research Student 2025(Spring)**

		8/
Applicant		
フリカ゛ナ		
N.T.	印	1
Name	signature	head
Date of Birth		
Sex	male • female	
Nationality		
Address	₹ TEL	

Please paste a
3 x 4
Photograph
showing
head and shoulder
only

		TEL					
		Write your name exactly same as is printed in your pass					
Guarantor							
フリカ゛ナ		Relationship to applicant					
Name		· · · · · · · · · · · · · · · · · · ·					
Name		signature					
Address	₹						
Address		TEL					
Name of gradua	ate						
school apply for		Name of major					
Research Subje	ect						
Research Period		Full academic year 2024/ Spring Semester 2025					

Doctoral Adviser's Informal Consent (Applicants are required to contact prospective advisors in advance.)

I accept the research guidance.	Date /	Name/	印
1			

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確認者印			所見及び審査	查内容記入欄			
(1)学事センター	受付						
(2)専攻主任	審査結果	可·否					
(3)研究科委員長	審査結果	可・否					
(4)学事センター長	審査結果	可·否					
(5)学務担当副学長	審査結果	可・否					
決裁 : 上記の者の受入	れを 許可・フ	下許可 とする		決裁日 学 長	年	月	日 印

Educational backgrou	nd						
	Name of School	Year and of Entrar Compl	ce and	Diploma or Degree awarded, Major subject			
		From					
Undergraduate Level							
		То					
		From					
Graduate Level		То					
				_			
Total y	rears of schooling mentioned above	ve as of A	oril 1,20	25 : Years			
Past and Present resea	arch status						
	Begin with the most recent emp ne a of organization	oloyment,	if appli	Period of employment			
		Fro	om	То			
		Fro	om	То			
★Only for Internation	al students	<u>'</u>					
Ctatus of Decidence		Period	od From:				
		of stay					
				pected period of enrollment of current organization: To:			
If you live in Japan with colle	ge student status, please write current schoo	ol's name like	university	or language school, and expected period of enrollment of the school			
*Only for Internation							
Plan of payment the to a) Self	ишоп			1			
o) Supporter in Jap							
c) Supporter living	g abroad (Relationship with	the app	licant:	)			