特別聴講学生・特別研究学生（交換留学生）入学願

Application Form for Special Auditing Students or Special Research Students

高知大学長　殿

To the President of Kochi University

　私は、下記の通り高知大学へ特別聴講学生／特別研究学生として入学したいので許可願います。

I hereby apply to enroll at Kochi University as a Special Auditing Student / Special Research Student.

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|  | | | | | | | | 申請年月日　Date of Application  ／　　　／ | | | | | | | |
| 氏名（フリガナ）  Name in Japanese KANA | 姓　Family name | | | | | | 名　Given name, Middle name | | | | | | | 写真貼付  PHOTO | |
|  | | | | | |  | | | | | | |
| 氏名（アルファベット・漢字）  Name in alphabet or Chinese character | 姓　Family name | | | | | | 名　Given name, Middle name | | | | | | |
|  | | | | | |  | | | | | | |
| 生年月日  Date of birth |  | | 年  Year | |  | | 月  Month |  | | | | 日  Date | |
| 国籍  Nationality |  | | | | | | | 性別Gender | | | | | | 男　 ・ 　女  Male / Female | |
| 出生地・本籍地  Permanent Address |  | | | | | | | | | | | | | | |
| 現住所  Present Address |  | | | | | | | | | | | | | | |
| 電話番号  Phone number | (+ ) | | | | | | メールアドレス  Email address | | |  | | | | | |
| 出身大学における  在籍状況  Status at home institution | 大学名University Name | | | | | |  | | | | | | | | |
| □ 学部生　 □ 修士課程　 □博士課程  Undergraduate Master’s course Doctoral course | | | | | | | | | | |  | | 年  School year | |
| 学部/研究科Faculty / School | | | | | |  | | | | | | | | |
| 学科/専攻　Department / Major | | | | | |  | | | | | | | | |
| 留学希望期間  Expected period of study at KU |  | 年  Year | |  | | 月  Month | ～  to | |  | | 年  Year | |  | | 月  Month |
| 希望所属部局  Faculty / School for which you apply | 学部 Undergraduate (Faculty of \_\_\_\_\_ ) | | | | | | | | | | | | | | |
| □ 人文社会科学部 Humanities and Social Sciences 　　□ 教育学部 Education  □ 理工学部 Science and Technology　　　 　　　 □ 医学部　Medical School  □ 農林海洋科学部 Agriculture and Marine Science  □ 地域協働学部 Regional Collaboration  □ 土佐さきがけプログラム TOSA Innovative Human Development Programs | | | | | | | | | | | | | | |
| 修士課程　Master’s course | | | | | | | 博士課程　Doctoral course | | | | | | | |
| □ 人文社会科学専攻  Humanities and Social Sciences Program  □ 教育学専攻 Education Program  □ 理学専攻 Science Program  □ 医科学専攻 Medical Science Program  □ 看護学専攻 Nursing Science Program  □ 農学専攻 Agricultural Science Program  □ 地域協働学専攻  Regional Collaboration Program | | | | | | | □ 応用自然科学専攻Applied Science Program  □ 医学専攻Medicine Program  □ 黒潮圏総合科学専攻  Kuroshio Science Program | | | | | | | |
| 専門職学位課程 Professional　Degree Course | | | | | | | |
| □ 教職実践高度化専攻  Advanced Professional Development in Teacher Education | | | | | | | |

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| 志望参加プログラム Program for which you apply | | | | | | | | |
| □ 特別聴講学生  　Special Auditing Student | | | | | □ 特別研究学生  Special Research Student | | | |
| □ 特別聴講学生（短期プログラム）Special Auditing Student (Short term, Summer course)  プログラム名 Name of Program（　　　　　　　　　　　　　　　　） | | | | | | | | |
| 日本語能力　Japanese language proficiency | | | | | | | | |
| □ 上級 Advanced | □ 中級 Intermediate | | | □ 初級 Elementary | | | □ 学習歴なし　N/A | |
| 日本語能力試験　Japanese Language Proficiency Test | | | | |  | 級　level |  | |
| 英語能力　English language proficiency | | | | | | | | |
| □ 上級 Advanced | □ 中級 Intermediate | | | □ 初級 Elementary | | | □ 学習歴なし　N/A | |
| □ TOEFL |  | 点Score | | □ IELTS | | |  | 点Score |
| 学習・研究計画　Study / Research plan at KU  （特別研究学生は研究テーマを記入すること　Special Research Students should write their research topic.） | | | | | | | | |
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| 申請者署名　Signature of Applicant | | |  | | | | | |