Preliminary Eligibility Check Sheet　　　　　　　　　　 （注）記入は、日本語又はローマ字体を用いてください。　Please fill in Japanese or English

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 氏 名  Name | | 英文  In English | | Family Name First Name Middle Name | | | | | 男（M）  ・  女（F） | 希望専攻・課程  Program to apply  （Circle One） | A. Master’s Program in Medical Sciences  B. Professional Degree Program in Public Health.  C. Doctoral Program in Medicine  D. JD Program in Genomic Medicine  E. Doctoral Program in Public Health  F. Doctoral Program in Medical Sciences | | | | Financial Status  国　費　 ・ 　私　費  MEXT scholarship / Private Financed | |
|  | | | | |
| フリガナ  Katanakana | |  | | | | |
| 母国語  Name in Home Language | |  | | | | | 生年月日  Date of Birth | Date of birth (yyyy/mm/dd)  / 　　/ 　　Age（　　years old） | | | | 国　籍Nationality | |
| 希望研究分野とコンタクト有無  Desired Research Field (Department)　and Approval | | | | | Research Field  ( ) | | Approved to Apply?  ( Yes / No) | AAO ID: | 正規の修学年数  Officially Required　Years for Graduation | 入学及び卒業年月  Year and Month of  Entrance and Graduation/Completion | | | 修学年数  Actual Period of Schooling  You have Attended | | 専攻科目  Major Subject  if Any | 学位・資格  Diploma or  Degree Awarded |
|  | | | | 学　校　名　所　在　地  Name and Address of School | | | | |
|  | Year | Month | Year | month |
| 初 等 教 育  Elementary Education | | | | 学校名  Name | |  | | | 年  yrs | from |  |  |  |  |  |  |
|  | 小　学　校 | |  | 所在地  Location | |  | | | to |  |  |
| Elementary School | | | |
| 中 等 教 育  Secondary Education | | | | 学校名  Name  所在地  Location | |  | | | 年  yrs | from |  |  |  |  |  |  |
|  | 中　学　校 | |  |  | | | to |  |  |
| Lower Secondary School | | | |
| High School | | | | 学校名  Name | |  | | | 年  yrs | from |  |  |  |  |  |  |
|  | 高　　　校 | |  |
| Upper Secondary School | | | | 所在地  Location | |  | | | to |  |  |
| 高 等 教 育  Higher Education | | | | 学校名  Name  所在地  Location | |  | | | 年  yrs | from |  |  |  |  |  |  |
|  | 大　　　学 | |  |  | | | to |  |  |
| Undergraduate Level | | | |
|  | | | | 学校名  Name | |  | | | 年  yrs | from |  |  |  |  |  |  |
|  | 大　学　院 | |  |
| Graduate Level | | | | 所在地  Location | |  | | | to |  |  |
| 以上を通算した全学校教育修学年数  Total years of schooling mentioned above | | | | | | | | | 年  yrs | Total | yrs | | yrs | |  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 研　究　歴  Research Career | 研究機関 Name of Research Institution | 職名 Position | 所在地 Address | 研究期間 Period of Research | 年数　years |
|  |  |  | / / ~　　/ / | Years Month(s) |
|  |  |  | / / ~　　/ / | Years Month(s) |
| 職　　　歴  Employment Record | 勤務先名 Name of Organization/Company | 職名Position | 所在地 Address | 在職期間 Period of employment | 年数　years |
|  |  |  | / / ~　　/ / | Years Month(s) |
|  |  |  | / / ~　　/ / | Years Month(s) |