

1 在学中又は入学予定の外国人の氏名及び在留カード番号  
Name and residence card number of the foreigner being at school or planning to enter the school  
(1)氏名 (Your name) (2)在留カード番号 (Your number)  
Name Residence card number

2 通学先 Place of Study  
(1)学校名 Graduate School of Medicine, Kyoto University / 京都大学医学研究科  
Name of School  
(2)所在地 54, Shougoin Kawahara-cho, Sakyo-ku, Kyoto / Yoshida-konoe-cho, Sakyo-ku, Kyoto  
Address 京都市左京区聖護院川原町54 / 京都市左京区吉田近衛町 (Your laboratory's address)  
電話番号 075-XXX-XXXX  
Telephone No. (Your laboratory office's phone number) Write down your laboratory's address and phone number here.

(3)法人名 Corporation name  
(4)法人番号(13桁) Corporation no. (combination of 13 numbers and letters)

(5)授業形態 Type of class  
 昼間制 Day classes  昼夜間制 Day-Evening classes  夜間制 Evening classes  
 サテライト制 (双方向通信による遠隔授業を受ける場合に記入) Satellite program (fill in this box when attending remote classes that use two-way communication)  
 通信制 (単位の一部をビデオ又はインターネット等による教育により取得できる場合を含む。) Correspondence course (including cases receiving credits for education via video or internet)

(6)生活指導担当者名 (通学先が専修学校, 各種学校, 中学校又は小学校の場合に記入)  
Name of the resident adviser in Japan (in case that the place of study is an advanced vocational school, miscellaneous school, junior high school or elementary school)

(7)学生交換計画の有無及び当該計画の策定主体 (通学先が高等学校, 中学校又は小学校の場合に記入)  
Is the applicant participating in a student exchange program? Which organization is in charge of that program?  
(when the place of study is senior high school, junior high school or elementary school)  
 国又は地方公共団体の機関 National or local government  独立行政法人 Incorporated administrative agency  国立大学法人 National university corporation  学校法人 Educational foundation  
 公益社団法人又は公益財団法人 Public interest incorporated association or public interest incorporated foundation  その他 Others

3 入学年月日 Date of entrance  
年 月 日 Year Month Day

4 週間授業時間(予定を含む。) Lesson hours per week(including scheduled lessons) 時間 hours

5 在籍区分 Registration  
 大学院(博士) Doctor  大学院(修士) Master  
 大学院(研究生/専ら聴講によらない) Graduate school (Research student / not study through auditing courses exclusively)  大学院(研究生/専ら聴講による) Graduate school (Research student / study through auditing courses exclusively)  
 大学(学部生) Undergraduate student  大学(聴講生・科目等履修生) University (Auditor elective course student)  大学(別科生) University (Japanese language course student)  
 大学(研究生/専ら聴講によらない) University (Research student/ not study through auditing courses exclusively)  大学(研究生/専ら聴講による) University (Research student / study through auditing courses exclusively)  
 短期大学(学科生) Junior college (Regular student)  短期大学(聴講生・科目等履修生) Junior college (Auditor elective course student)  短期大学(別科生) Junior college (Japanese language course student)  
 高等専門学校 Technical school  専修学校(専門課程) Advanced vocational school (Specialized course)  専修学校(高等課程) Advanced vocational school (Higher course)  
 専修学校(一般課程) Advanced vocational school (General course)  各種学校 Miscellaneous school  
 日本語教育機関(専修学校専門課程) Japanese language institution (Advanced vocational school of specialized course)  日本語教育機関(専修学校一般課程) Japanese language institution (Advanced vocational school of general course)  
 日本語教育機関(準備教育課程) Japanese language institution (Preparatory courses)  日本語教育機関(各種学校) Japanese language institution (Miscellaneous school)  
 日本語教育機関(その他) Japanese language institution (Others)  
 高等学校 Senior high school  中学校 Junior high school  小学校 Elementary school  その他 Others

Not required to be filled in by Office of Student Affairs!

6 学部・課程 Faculty / Course  
 (5で大学院, 大学, 短期大学 (いずれも聴講生・科目等履修生及び研究生の場合を含む) を選択した場合に記入)  
 (Check the following item(s) if you selected Doctor, Master, Graduate school (Research student), Undergraduate student, University (Auditor elective course student), University (Research student), Junior college (Regular student) or Junior college (Auditor elective course student) as your answer to question 5)

- |   |   |  |   |   |  |
|---|---|--|---|---|--|
| <input type="checkbox"/> 法学<br>Law  | <input type="checkbox"/> 経済学<br>Economics | <input type="checkbox"/> 政治学<br>Politics       | <input type="checkbox"/> 商学<br>Commercial science | <input type="checkbox"/> 経営学<br>Business administration | <input type="checkbox"/> 文学<br>Literature      |
| <input type="checkbox"/> 語学<br>Linguistics                                      | <input type="checkbox"/> 社会学<br>Sociology | <input type="checkbox"/> 歴史学<br>History        | <input type="checkbox"/> 心理学<br>Psychology        | <input type="checkbox"/> 教育学<br>Education               | <input type="checkbox"/> 芸術学<br>Science of art |
| <input type="checkbox"/> その他人文・社会科学<br>Others(cultural science/ social science) |   |  | <input type="checkbox"/> 理学<br>Science            | <input type="checkbox"/> 化学<br>Chemistry                | <input type="checkbox"/> 工学<br>Engineer        |
| <input type="checkbox"/> 農学<br>Agriculture                                      | <input type="checkbox"/> 水産学<br>Fisheries | <input type="checkbox"/> 薬学<br>Pharmacy        | <input type="checkbox"/> 医学<br>Medicine           | <input type="checkbox"/> 歯学<br>Dentistry                |  |
| <input type="checkbox"/> その他自然科学 ( )<br>Others(natural science)                 |   | <input type="checkbox"/> 体育学<br>Sports science |   | <input type="checkbox"/> その他 ( )<br>Others              |  |

7 所属予定の研究室 (5で大学院を選択した場合に記入)  
 Research room (Fill in the following item(s), if you selected Doctor, Master or Graduate school (Research student) as your answer to question 5)

(1) 研究室名 (Your Laboratory's name) All students need to fill in (1),(2).

Name of research room \_\_\_\_\_

(2) 指導教員氏名 (Your Professor's name)

Name of mentoring professor \_\_\_\_\_

8 専門課程名称 (5で高等専門学校～各種学校を選択した場合に記入)  
 Name of specialized course (Check the following item(s) if you selected "Technical school" through to "Miscellaneous school" as your answer to question 5)

- |  |   |  |  |                                    |
|--|---|--|--|------------------------------------|
| <input type="checkbox"/> 工業<br>Engineering                     | <input type="checkbox"/> 農業<br>Agriculture                      | <input type="checkbox"/> 医療・衛生<br>Medical services / Hygienics | <input type="checkbox"/> 教育・社会福祉<br>Education / Social welfare | <input type="checkbox"/> 法律<br>Law |
| <input type="checkbox"/> 商業実務<br>Practical commercial business | <input type="checkbox"/> 服飾・家政<br>Dress design / Home economics | <input type="checkbox"/> 文化・教養<br>Culture / Education          | <input type="checkbox"/> その他 ( )<br>Others                     |                                    |

9 卒業までの年月 (予定) Scheduled period of education until graduation 年 月  
 (交換留学生の場合, 交換留学受入満了までの年月) Year(s) Month(s)  
 (If the applicant is an exchange student, fill in the scheduled period of education until the end of the exchange)

以上の記載内容は事実と相違ありません。 I hereby declare that the statement given above is true and correct  
 通学先又は所属機関名, 代表者氏名の記名及び押印 / 申請書作成年月日  
 Name of the place of study or organization and representative, and official seal of the organization / Date of filling in this form

印 年 月 日  
 Seal Year Month Day

注意 Attention

申請書作成後申請までに記載内容に変更が生じた場合, 所属機関等が変更箇所を訂正し, 押印すること。  
 In cases where descriptions have changed after filling in this application form up until submission of this application, the organization must correct the part concerned and press its seal on the correction.

Please fill in only the blue part.

It takes around a day to be able to give you back.