

Graduate School of Medicine, Kyoto University
Doctoral Program in Public Health 2026

Selection	General Selection / Special Selection for Working Applicants / Special Selection for International Applicants
Requirement	6 • 7 • 8

※Circle either number

Application Form for Eligibility Screening

Name in Katakana			
First Name		Last Name Middle Name	
Date of birth	/ / (yyyy/mm/dd in western calendar) (Age as of April 1 st 2026 years)		
Choice of Research Field	Division	Research Field	
()			
Education Record	Fill out your education record since high school in western calendar.		
	Entered Date / / Graduated Date / / (yyyy/mm/dd)	Enrollment Period years	High School:
	Entered Date / / Graduated Date / /	years	University: Faculty: Major:
	Entered Date / / Graduated Date / /	years	
	Entered Date / / Graduated Date / /	years	
	Entered Date / / Graduated Date / /	years	
Employment Record	Fill out your employment record until present if you have any. (in western calendar) If you had an assignment at research institute as an employer of a private company, fill out the name of the institute and assignment period.		
	Entered Date / / Graduated Date / / (yyyy/mm/dd)	Period of Employment years	
	Entered Date / / Graduated Date / /	years	
	Entered Date / / Graduated Date / /	years	
	Entered Date / / Graduated Date / /	years	
Current Address		Postal code —	
		Telephone No. () — Mobile No. () —	
		e-mail @	
Present Position	<input type="checkbox"/> Undergraduate Student (th grade) <input type="checkbox"/> Graduate Student (Doctoral / Master's Program/ th Grade) <input type="checkbox"/> Research Student (Fill out "Affiliation"⇒) <input type="checkbox"/> Employed (Fill out "Affiliation"⇒) <input type="checkbox"/> Others (Fill out "Affiliation"⇒)		Affiliation (Fill out your position, laboratory name and institution name) Telephone No. () —
	Are you an employee? <input type="checkbox"/> Yes • <input type="checkbox"/> No If you are an employee, you will <input type="checkbox"/> continue working • <input type="checkbox"/> take leave • <input type="checkbox"/> resign ,after the enrollment to Graduate School of Medicine.		