Saga University Program for Academic Exchange (SPACE-E) Starting in Fall 2023 or Spring 2024

APPLICATION PACKAGE (Use this sheet as the cover of your application)

Date:	(Month)	(Day)	(Year)
Name of Applicar	nt:		
Home University:			

This application should be sent as a complete package containing all the documents specified in ①-⑩, and be sent by email to the email address below <u>through the office responsible for student</u> <u>exchange at the applicant's home university.</u> <u>Please do NOT send original documents by post.</u> Application materials are NOT returned after review, and will not be used for any other purpose.

Check List	Check
① Forms No. 1-3 of this Application Package	
② One (1) letter of Recommendation	
3 Academic Transcripts, issued by the student's home institution	
④ Language Proficiency test result (i.e., TOEFL, IETS etc.)	
Applicants for SPACE-E: You must submit your score sheet.	
⁽⁵⁾ One (1) copy of Certificate of Enrollment in the home institution,	
issued by the student's home institution	
6 Application for Certificate of Eligibility for a Status of Residence	
⑦ Certificate of Health	
8 Financial Statement (Bank Statement, Salary certificate of your supporter, etc.)	
for supporting the Applicant's study abroad (at least 60,000 yen per month)	
(9) A copy of your passport	
1 Portfolio (only applicable to students in <u>Art and Design major)</u>	
Up to ten images/photos of your work. If you include moving images, submit it in the format	;
supported by Windows Media Player or Quick Time Player and within 5 minutes.	
<u>E-mail: student-int@mail.admin.saga-u.ac.jp</u>	

Center for Promotion of International Exchange, Saga University

1 Honjo-machi, SAGA 840-8502, JAPAN

Phone: +81-952-28-8169 Fax: +81-952-28-8819 HP: https://www.irdc.saga-u.ac.jp/

Application deadline:

May 15, 2023 for Fall 2023 and November 15, 2023 for Spring 2024 Before sending documents, Home university must nominate students.

No.1-A Saga University Program for Academic Exchange (SPACE-E) Starting in Fall 2023 or Spring 2024 APPLICATION FOR ADMISSION

(Family) (First)			Please attach your photo
(Name in Chinese Characters)	
(3) Current Address:			
Phone (preferably cell phone nu Permanent Address:			
Phone:			
E-mail:			
Emergency contact (name, relation	ship):		
(address/phone number/ e-mail/fax	:):		
	(6) Date of Birth:		
☐ Single ☐ Married		· • /	(Year)
(7) Country of Present Citizenship:			
Passport information:	Data afia		
Number: Issuing authority:			
issuing autionty		xpiration	
(8) I would like to be a SPACE studen	t of the faculty at Sa	ga University th	at I checked immediately below.
* Students who want to study in the fie	ld of humanities and s	social science don	't have to choose any faculties to stu
Students who want to study in the ne		ı study at.	
in. After reading your essay, we'll de	cide which faculty you		
•		☐ Faculty of Sc	eience & Engineering
in. After reading your essay, we'll de		☐ Faculty of Sc	eience & Engineering
in. After reading your essay, we'll de	[,	
in. After reading your essay, we'll de	ho apply for Fall 20	23) or April 1 st 2	2024(for those who apply for Spri
 in. After reading your essay, we'll de Faculty of Agriculture (9) As of October 1st 2023 (for those w 	ho apply for Fall 20	23) or April 1 st 2	2024(for those who apply for Spri
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(10) My expected date of completion/graduation is _____(year) ____(month).

(12) Language Proficiency Requirements

SPACE-E: You <u>must</u> submit a score sheet of TOEFL, IELTS or TOEIC. The classes of the elective subjects in SPACE-E are conducted in English, and your presentations in the Field Work on Japanese Affairs I & II should be made in English. If you take an Independent Study, your language proficiency of Japanese or English is required to be good enough. Also you might want to submit the score of the level of Japanese Language Proficiency Test if you have taken.

 TOEFL Score:
 ______, TOEIC Score:
 ______,

 Japanese Language Proficiency Test: Score:
 ______ of Level:

Languaga	Proficiency						
Language	Excellent	Good	Fair				
Japanese							
English							
(other)							

(13) Educational background (beginning with the last high school you attended):

Institution	Name of institution	Major field of study	Entrance and Completion (Year)
High school			
College/			
University			

(14) Which do you prefer to live, in International House (Dormitory) or in a Private Apartment?

□ International House □ Private apartment

Note: This question doesn't guarantee that you can live in the option you chose.

No.1-C

(15) Do you receive any scholarship from your home university or country?

🗆 Yes 🗆 No

If yes, please let us know the amount per month. (

*If you receive the whole amount of the scholarship just once, please divide the amount by the number of the months you plan to study in the program.

)

I certify that all of the information provided on these documents is complete and true to the best of my knowledge, and I agree to comply with the rules and regulations of Saga University if admitted to the SPACE program.

Date:	ie:			Signature:
	(Month)	(Day)	(Year)	

*We don't accept application without applicant's signature.

Signature of Director/Coordinator in Charge of International Student Exchange:

	, Date:
	[Print name]
Phone Number:	[Title]
E-mail address:	
	[Division]
	[University]

ESSAY

SPACE-E: Please write in ENGLISH.

(Write Approximately 500 words in English. Use a typewriter or a word processor.)

Major at your home university:

(1) Briefly summarize your motivation for applying for the SPACE-E program.

(2) Briefly describe your plan of study after returning to your home university upon the completion of SPACE-E.

Pre-Registration for Independent Study

<u>lf you</u>	don't	<u>take</u>	Independen	<u>t Study,</u>	you	don't	need	to	submit	the	form	No.3.
Name:												
Home Inst	itution	:										

If you would like to do an Independent Study, then you can choose a research topic and a professor of the relevant faculty from the lists of professors and their research topics of the faculty. You can find the lists of professors together with their research topics at the URL as follows:

http://research.dl.sagau.ac.jp/search/index.html?lang=en&template=template1

The professors listed on the Saga University website can basically accept ONE (1) SPACE student, although some professors may not be able to do so without prior notice. <u>Therefore,</u> <u>it is essential that you contact the professor you would like to have as your supervisor for</u> <u>independent study **BEFORE** you submit your application. You will need to obtain his/her prior consent before you can submit your application. If you have received no response or permission for supervision from any professor that you contacted, please contact the International Affairs Division of Saga University. We will attempt to find a suitable professor who might be available as supervisor for your studies.</u>

- Students of the Faculty of Science and Engineering /Agriculture <u>must</u> take Independent Study.
- If you don't submit this form, you cannot take Independent Study.

I would like to take Independent Study as follows:

- The semester(s) of my registration for *Independent Study* is/are:
 - □ Fall 2023 □ Spring 2024

• The field and topic in which I would like to take Independent Study are: ______ Field:

Topic:

• The professor under whose supervision I would like to study is:

Professor's Name:

Note: Each professor can accept only one SPACE student for Independent Study.

The selection of your supervisor at Saga University will be based on the content of your study specified here. You are not allowed to change your study field after submitting this form.

SAGA UNIVERSITY

Center for Promotion of International Exchange

1 Honjo-machi, Saga 840-8502, Japan

CERTIFICATE OF HEALTH

Applicant'	's name:						
		(Family)		(First)	(N	liddle)	
Date of bin	rth:				Se	x: 🗆 Male 🗆	Female
Height:	() cm					
Weight:	() kg					
Eye Sight:	Uncorrected:	Right ()	Left ()		
	Corrected:	Right ()	Left ()		
Hearing:		Right ()	Left ()		
Urinalysis	: Alb	umin ()	Sugar ()	Occult Blood	()
Respirator	y Organs:						
Chest X	-ray:						
Please c	comment on co	ndition of a	pplicant [*]	's lungs, giving	date of o	examination.	
Circulator	y Organs:						
Blood P	ressure: Sy	stolic ()	Diastolic ()	P.R. () p.m.
Nervous S	ystem:						
Please give a detailed description of any disease, including chronic ailments or physical							
disabilities	s, found.						
Please giv	e the applicant	's medical l	nistory.				
Is the gene	eral state of the	applicant's	health in	mind and body	good er	ough for him/her	to purse
the course	of study conte	mplated in	Japan?				
Exc	ellent		With prud	lence, probably	no serio	ous problem	
🗆 Ade	quate		Doubtful				

Signati	ire:	Date:
(Physic	cian's Name in Print):	
Office/	Institution:	
Addres		
1144101		

* The date of certification should not be more than 6 months prior to the application deadline. If another type of Certificate of Health mentions all of the above examination points, it can be used in place of this form.