

**Saga University Program for Academic Exchange (SPACE-SAGA)  
Starting in Fall 2026 or Spring 2027**

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

Date: \_\_\_\_\_ (Month) \_\_\_\_\_ (Day) \_\_\_\_\_ (Year)

Name of Applicant: \_\_\_\_\_

Home University: \_\_\_\_\_

**This application should be sent as a complete package containing all the documents specified in ①-⑧, and be sent by email to the email address below through the office responsible for student exchange at the applicant's home university. Please do NOT send original documents by post. Application materials are NOT returned after review, and will not be used for any other purpose.**

<u>Check List</u>	Check
① Forms No. 1-2 of this Application Package	<input type="checkbox"/>
② One (1) letter of Recommendation	<input type="checkbox"/>
③ Academic Transcripts, issued by the student's home institution	<input type="checkbox"/>
④ Language Proficiency test result (i.e., TOEFL, IETS etc.)	<input type="checkbox"/>
⑤ One (1) copy of Certificate of Enrollment in the home institution, issued by the student's home institution	<input type="checkbox"/>
⑥ Application for Certificate of Eligibility for a Status of Residence	<input type="checkbox"/>
⑦ Financial Support Statement (3500USD for 1 semester /7000USD for 1 year)	<input type="checkbox"/>
⑧ A copy of your passport	<input type="checkbox"/>

**E-mail: student-int@mail.admin.saga-u.ac.jp**

**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, 2026 for Fall 2026 and November 15, 2026 for Spring 2027**  
**Before sending documents, Home university must nominate students.**

**Saga University Program for Academic Exchange (SPACE-SAGA)**

**Starting in Fall 2026 or Spring 2027**

APPLICATION FOR ADMISSION



(1) Program you apply for: SPACE-SAGA

(2) Name: (as it appears on your passport)

\_\_\_\_\_
(Family) (First) (Middle)
(Name in Chinese Characters \_\_\_\_\_ )

(3) Current Address: \_\_\_\_\_

Phone (preferably cell phone number): \_\_\_\_\_

Permanent Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Emergency contact (name, relationship): \_\_\_\_\_

(address/phone number/ e-mail/fax): \_\_\_\_\_

(4) Sex:

Male

Female

(5) Marital Status:

Single  Married

(6) Date of Birth:

(Month) (Day) (Year)

(7) Country of Present Citizenship: \_\_\_\_\_

Passport information:

Number: \_\_\_\_\_ Date of issue: \_\_\_\_\_

Issuing authority: \_\_\_\_\_ Date of expiration: \_\_\_\_\_

(8) As of October 1st 2026 (for those who apply for Fall 2026) or April 1st 2027 (for those who apply for Spring 2027), I am an undergraduate or graduate student of the department, institution, major, as I have specified below:

Home Institution: \_\_\_\_\_

Department: \_\_\_\_\_ Major: \_\_\_\_\_

Specialization: \_\_\_\_\_

The last academic year that you have completed by the date specified above (i.e., October 1st 2026 or April 1st 2027) is:

the 1st year, the freshman year.  the 2nd year, the sophomore year.

the 3rd year, the junior year.

(10) My expected date of completion/graduation is \_\_\_\_\_(year) \_\_\_\_\_(month).

(11) The duration of stay that I would like is from October 1<sup>st</sup>, 2026 or April 1<sup>st</sup>, 2027 to:  
 \_\_\_\_ (month) \_\_\_\_ (day) \_\_\_\_ (year)

That is, I would like to stay for  one semester /  one year (two semesters)

(12) Language Proficiency Requirements

You must submit a score sheet of TOEFL, IELTS or TOEIC. The classes in SPACE-SAGA are conducted in English, and your presentations in the Field Work on Japanese/Saga Affairs should be made in English. Also you might want to submit the score of the level of Japanese Language Proficiency Test if you have taken.

TOEFL Score: \_\_\_\_\_, IELTS Score: \_\_\_\_\_, TOEIC Score: \_\_\_\_\_,  
 Japanese Language Proficiency Test: Score: \_\_\_\_ of Level: \_\_\_\_

Language	Proficiency		
	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.

(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 -SAGA program.

Date: \_\_\_\_\_ 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]

\_\_\_\_\_ [Title]

Phone Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

\_\_\_\_\_ [Division]

\_\_\_\_\_ [University]

ESSAY

SPACE-SAGA: Please write in ENGLISH.

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

Full name: \_\_\_\_\_

Major at your home university: \_\_\_\_\_

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

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

佐賀大学経費支弁書  
**SAGA UNIVERSITY**  
**FINANCIAL SUPPORT STATEMENT**

在留資格認定証明書の申請に先立ち、佐賀大学は経費支弁書の保管が必要であり、本情報は佐賀大学に入学予定の非居住者の学生に財政支援を行うことに同意した個人または機関から提供されるものである。

Prior to issuing a COE, Saga University must have a financial statement on file. This information is to be provided by the person or agency who has agreed to provide financial support for a non-immigrant student at Saga University.

経費支弁者名 : \_\_\_\_\_  
Financial Supporter's Name:

経費支弁者の職業 : \_\_\_\_\_  
Financial Supporter's Occupation:

経費支弁者の住所 : \_\_\_\_\_  
Financial Supporter's Address:

経費支弁者との関係: \_\_\_\_\_  
Relationship with Financial Supporter:

経費支弁者の年収  
Financial Supporter's Annual Salary USD\$: \_\_\_\_\_

経費支弁者預金残高  
Financial Supporter's Saving Account USD\$: \_\_\_\_\_

日本における半年の滞在費 **\$ 3,500**  
Estimated cost of staying in Japan for a semester  
日本における1年の滞在費 **\$ 7,000**  
Estimated cost of staying in Japan for one year

私は佐賀大学に入学予定の学生 \_\_\_\_\_ に年間約 3,500/7,000 ドルの支援をするつもりである。

I do intend to make contributions of approximately \$3,500/\$7,000 per year in support of \_\_\_\_\_ who is a prospective student of Saga University.

経費支弁者による誓約  
**OATH OR AFFIRMATION OF SPONSOR**

私は、ここに記載された情報が真実であり、正確であることを誓います。  
I swear that the information supplied on this Financial Support Statement is true and correct.

経費支弁者署名  
Signature of Financial Supporter: \_\_\_\_\_

日付  
Date: \_\_\_\_\_

経費支弁者の銀行残高証明書を一緒に提出してください。  
自国で奨学金をもらう方はその証明を出してください。  
Please attach the bank statement of financial supporter indicating that the above stated funds are available. If you receive some scholarship in your country, please attach the certificate.