

**INTERNATIONAL DOCTORAL PROGRAM IN INFORMATICS
GRADUATE SCHOOL OF INFORMATICS, KYOTO UNIVERSITY**

APPLICATION FORM

1. NAME

_____ , _____ , _____
(Family name) (First name) (Middle name)
 Male Female

2. NATIONALITY

Nationality : _____

3. DATE OF BIRTH

_____ (Year) (Month) (Day) (Age : as of April 1, 2020)

4. NAMES OF UNIVERSITY (UNDERGRADUATE) AND DEPARTMENT

University : _____

Department : _____

Graduated in _____
(Year) (Month)

5. NAMES OF GRADUATE SCHOOL AND DEPARTMENT

Graduate school : _____

Department : _____

Graduated in _____
(Year) (Month)

Will graduate in _____
(Year) (Month)

6. PRESENT STATUS IN DETAIL

7. PRESENT (MAILING) ADDRESS

Address : _____

E-mail address : _____

Telephone number : _____

Facsimile number : _____

8. DEPARTMENT APPLYING TO ENTER AT KYOTO UNIVERSITY

Department : _____

9. PROSPECTIVE SUPERVISOR AT KYOTO UNIVERSITY

Supervisor : _____

Please confirm the following by checking the box.

I will only apply for the Japanese Government (Monbukagakusho)
Scholarship through Kyoto University.

(Date)

(Signature)