

**OTEMON GAKUIN UNIVERSITY (OIDAI)   
EXCHANGE PROGRAM APPLICATION FORM**

Each column except signature must be filled out by typing and submitted as a PDF file after completion along with respective required document.

1. Personal Information

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| --- | --- | --- | --- | --- |
| Name: | Family: | |  | |
| *(Please type as it appears on your passport)* | Given: | | Middle: | |
| Name in Japanese *(optional)* : | (In katakana) | | | |
| Date of Birth *(MM / DD / YYYY)* : |  | | | |
| Nationality : |  | |  | |
| Sex : | □Male | □Female | | □Prefer not to answer |
| Present Address : |  | | | |
| Phone : |  | |
| Email : |  | |
| Permanent Address : |  | | | |
| Emergency Contact : | Full Name: | | | |
| Phone : |  | | Email: | |
| Relationship : |  | |

2. Current Education

|  |  |  |  |
| --- | --- | --- | --- |
| Home Institution : |  | | |
| Course of Studies : |  | | Current Semester : |
| Year of Grade : |  | Estimated Month/Year of Graduation : | |

*\*Please note that you MUST maintain the matriculated, full-time student status at your home institution until the end of the exchange program.*

3. Academic Package (See the General guide P4~6 and choose one)

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| * + Japan Study Package |
| * + Japan Language Package |
| * + Japan Academic Study Package |
| Those who checked “Japan Study Package” and “Japan Language Package”, go to section no.4 “Language Proficiency”. Those who checked “Japan Academic Study Package”, go to section no. 5 “Purpose of your study at OIDAI”. |

4. Language Proficiency

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| --- | --- |
| First Language : |  |
| Second Language(s) : |  |

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| **【Survey for Japanese Proficiency】** |
| Please answer the following questions, in order for us to determine the level of Japanese Language Course. |
| 1. PREFERENCE |
| A) Please first read the syllabi, and then circle the level you believe the most suitable for you. |
| BEGINNER ELEMENTARY INTERMEDIATE |
|  |
| B) If your level is somewhere between two levels, do you want to study at upper level or lower level? |
| I prefer to join UPPER LEVEL / LOWER LEVEL |
|  |
| 2. EXPERIENCE |
| A). Why do you want to learn Japanese? |
|  |
| B). Have you ever studied Japanese language before? |
| YES 🡪 Answer B-1) and B-2). / NO 🡪 Skip to question C) |
| B-1). How/How long/How often/Where have you studied Japanese language? |
| How? |
| How long? |
| How often? |
| Where? |
| B-2). What is the name of the textbook you used to study Japanese? And which units have you completed studying? |
| C). Can you read Hiragana and Katakana? |
| CONFIDENT / SOMEWHAT CONFIDENT / MAYBE NOT CONFIDENT / NOT CONFIDENT |
| D). Can you write Hiragana and Katakana? |
| CONFIDENT / SOMEWHAT CONFIDENT / MAYBE NOT CONFIDENT / NOT CONFIDENT |
| E). Do you have JLPT certificate? |
| YES (N1 / N2 / N3 / N4 / N5) / NO |

5. Purpose of your study at OIDAI

6. Term Applying for and Length of study

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| □　2024 Spring (One Semester) |
| * 2024 Spring and 2024 Fall (Two Semesters) |

7. Accommodation

|  |  |  |  |
| --- | --- | --- | --- |
| Which type of accommodation would you prefer? | | | |
| * Dormitory | * Apartment | * Homestay |

8. Document Checklist

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| □ Exchange Program Application Form　（Attached 01.ApplicationForm\_Spring2024） |
| □ Resume \*Please include working experience in a format. |
| □ Letter of Recommendation issued by the host institution |
| □ Official Transcript |
| □ Bank Statement issued by a financial institution |
| □ Certificate of Physical Examination |
| □ Image of Portrait Photograph  □ Consent Form of Conditions on Exchange Program with COVID-19  □ Consent Form of Comprehensive Insurance for Students Lives |
| □ Application for Certificate of Eligibility (Attached　02.Application\_for\_Certificate\_of\_Eligibility) |
| □ Passport Copy  □ Certificate of Japanese Language Proficiency Test \*if you have. |

9. Any points to consider concerning your mental or physical conditions

10. Waiver

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| The role of Otemon Gakuin University (hereinafter OIDAI) staff and instructors is limited to scheduled programs and activities and does not extend to independent activities. OIDAI staff and instructors will not normally accompany participants to independent activities. OIDAI is released from any and all liability, including but not limited to, liability　arising from the negligence or fault of the entities or persons resulting in death, disability, personal injury, property damage, property theft of applicants or actions of any kind which may hereafter happen to applicants at any time including traveling to and from this exchange program. |

11. Life in Japan

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| OIDAI reserves the right to ask students to refrain from activities such as driving, while enrolled on a program at OIDAI. Please understand this policy. While in Japan, please respect Japanese laws on alcohol and cigarette consumption, and be aware that illegal drug use carries very heavy penalties and will result in expulsion from the university, possible deportation and even a custodial sentence. |
| I hereby confirm that all information in this form is true and correct. I understand the above-mentioned information and conditions. During my study in Japan, I shall observe the rules and regulations of OIDAI and will concentrate on my studies, and will follow the teaching programs made by OIDAI. |

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| Signature of the applicant : |  | Date: |  |