

| |
|-----------------|
| Examinee Number |
| ※ |

Entrance Examination of Mie University Graduate School of Engineering Doctor's Course

Application Form of the Screening for Exemption of Oral Examination and Interview

Date of Application _____ Year Month Date

To the Dean of the Graduate School of Engineering, Mie University

Applicant's Name _____ Stamp _____

I hereby apply for the Screening for Exemption of Oral Examination and Interview of the entrance examination of Mie University Graduate School of Engineering Doctor's Course.

| | | | |
|--|--|--|---------------------------------|
| | Last Name | First Name | Middle Name |
| Name | | | |
| Date of Birth | Year Month Date | Years Old | Sex Male • Female |
| Nationality | | | |
| Current Address and Contact Number | | | |
| | Phone Number | () | — |
| | In Emergency | — | — |
| E-mail | | | |
| Address to send screening result (If different from the one above) | | | |
| Last School Attended | | | |
| | Year Month | Graduated • Expected to Graduate • Others () | |
| Division to Apply | Graduate School of Engineering Doctor's Course | | Division |
| Preferred Education and Research Field | | | Preferred Main Advising Teacher |

Note. ※Leave blank.

Entrance in April, 2020
 Mie University Graduate School of Engineering Doctoral Course

Circle the classificaton to apply.

| Classification | Examinee Number |
|------------------------------|-----------------|
| General Selection | ※ |
| Continuing Education Student | |
| Foreign Student | |

Curriculum Vitae

| Name | | Date of Birth | Year Month Date | |
|--|------|---------------|-----------------------|---------|
| Item | Year | Month | Date | Content |
| Educational Background (High School or Higher) | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| Employment History | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| | . | . | . | |
| Reward and Punishment | . | . | . | |
| | . | . | . | |
| I hereby declare that the information above is true and correct. | | | | |
| Year Month Date | | | | |
| Name _____ Stamp _____ | | | | |

Note. ※Leave blank.

Entrance in April, 2020
 Mie University Graduate School of Engineering Doctoral Course

Circle the classification to apply.

| Classification | Examinee Number |
|------------------------------|-----------------|
| General Selection | ※ |
| Continuing Education Student | |
| Foreign Student | |

Abstract of Master's Thesis

| | | | |
|--------------------------|--|----------------------|------------|
| Name | | Preferred Division | Division |
| | | Preferred Laboratory | Laboratory |
| Title of Master's Thesis | | | |

- Note. 1. Abstract should be within 1,000 letters (500 words in English).
 If you use a word-processing software, you may directly print on this form or print out on A4 paper.
2. Those who apply with application qualification ㊦ shall write their current research theme in "Title of Master's Thesis".
3. ※Leave blank.

Entrance in April, 2020
Mie University Graduate School of Engineering Doctoral Course

Record of Academic Attainment

Circle the classification to apply.

| Classification | Examinee Number |
|------------------------------|-----------------|
| General Selection | ※ |
| Continuing Education Student | |
| Foreign Student | |

| | | | |
|------|--|----------------------|------------|
| Name | | Preferred Division | Division |
| | | Preferred Laboratory | Laboratory |

| | |
|--|--|
| Title of Master's Thesis (or Graduation Thesis) | |
|--|--|

| | Employer and Period of Employment | Main Work Contents |
|-------------------------------------|-----------------------------------|-------------------------------------|
| | 職 歴 | Year Month ~ Year Month |
| Year Month ~ Year Month | | |
| Year Month ~ Year Month | | |
| Year Month ~ Year Month | | |
| Year Month ~ Year Month | | |
| Year Month ~ Year Month | | |

Please write down the details of past work experience related to research plan. If you have published any papers, please provide the title, co-author(s), journal name, volume number, issue number, year, and page number. (Within 1,000 letters in Japanese, or 500 words in English)

Note. ※Leave blank.

Entrance in April, 2020
Mie University Graduate School of Engineering Doctoral Course

Research Plan

Circle the classification to apply.

| Classification | Examinee Number |
|------------------------------|-----------------|
| General Selection | ※ |
| Continuing Education Student | |
| Foreign Student | |

| | | | |
|------|--|----------------------|------------|
| Name | | Preferred Division | Division |
| | | Preferred Laboratory | Laboratory |

Research Theme • Field

<Overview of Research Plan>

- Note. 1. Research Plan should be within 1,200 letters (600 words in English). Please describe succinctly and specifically. If you use a word-processing software, you may directly print on this form or print out on A4 paper.
2. ※Leave blank.

| Classification | Examinee Number |
|------------------------------|-----------------|
| General Selection | ※ |
| Continuing Education Student | |
| Foreign Student | |

Letter of Recommendation

To the Dean of the Graduate School of Engineering, Mie University

I recommend the applicant mentioned below for admission to the Mie University Graduate School of Engineering Doctor's Course.

| | | | |
|--------------------------|--|--|-----------------------|
| Applicant's Name | | Date of birth | Year Month Date |
| Preferred Division | | Preferred Education and Research Field | |
| Reason of Recommendation | | | |

- Note. 1. Please write applicant's first choice in "Preferred Education and Research Field".
 2. In "Reason of Recommendation", please explain applicant's personality, commitment to his/her study and Master's thesis, ability to accomplish research, etc.

Recommender

Name: _____

Signature: _____

Position: _____

Date: _____

Institution: _____

Address: _____

Phone: _____ E-mail: _____