

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 and in October, 2019  
 Mie University Graduate School of Engineering Doctoral Course

Circle the classificaton to apply.

# Curriculum Vitae

Classification	Examinee Number
General Selection	※
Continuing Education Student	
Foreign Student	

Name		Date of Birth	Shows/Heisei (or A.D.)	Year	Month	Date
Item	Year	Month	Date	Content		
Educational Background (High School or Higher)	.	.	.			
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Employment History	.	.	.			
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Reward and Punishment	.	.	.			
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I hereby declare that the information above is true and correct. <div style="text-align: center; margin-top: 20px;">             Year          Month          Date           </div> <div style="text-align: center; margin-top: 20px;">             Name _____ Stamp _____           </div>						

Note. ※Leave blank.

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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.

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# 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)	
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職 歴	Employer and Period of Employment	Main Work Contents
	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.

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# 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: \_\_\_\_\_