2024 JAUW INTERNATIONAL FELLOWSHIP APPLICATION FORM 1 (Personal Data)

MUST BE RECEIVED by: March 31, 2024

All entries must be single spaced and typed in English. The format must be kept as specified in this application form.

. Name in	full & Age,	Date of	i Birth										г	и год	30	
(surname/	family name	<u>.)</u>	(giv	ven name)			(mic	ldle name)					ŀ	PHOT	. ()	
													3. 5	cm x 4	ł. 5cm	
age /as of	Mar.31, 202	4	у	ear of birth	mor	nth _	day	_								
Postal add	lress and re	elated i	nforma	tion:												
2-1 E-mail a	ddress															
2-2 National	ity					Permane address	ent	(country	/regio	n)		(are	a/city)			
2-4 Postal/St address	creet				1		ļ									
2-5 Felephone number	(country/r	egion co	de) (area	a/city code) (lo	ocal code	your n	umber) 2-6 FAX		ountry/region	code) (a	area/city	code) (local code	e) (your nun	ıber
The name of	your rede	ration a	and/or F	Association												
Academic	-	ns				,							, ,			
Bachelor's degree	field				un	iversity						count	ry/regi	ion	year	
Master's degree	field				un	iversity						count	try/regi	ion	year	
Doctor's degree	field				un	iversity						count	try/regi	ion	year	
Presently Doctoral student	field					niversity							try/regi		from w	
5. Foreign	language p	roficien	cy leve	l: Please ma	rk A in t	the table l	below	for advanc	ed, I fo	or intermedia	te, E for	elemen	tary, a	nd N/A fo	or no profici	ency
	Speakir	ıg				Reading	g				Writi	ng				
English	A	Ι	F]	A	1	I	E	l		A	I		Е		
	l		II	N/.	$\Lambda \mid \Lambda$		т	F		NI/A	١.	-		E.	NI/A	

6. Letters of Recommendation Please list the names and capacities of three persons who are well acquainted with your work, indicating how long each of them has known you. Please select at least one person from the institute/university where you are presently working, a

professor if you are presently at graduate school,	, for example.

	If you are a member of an NFA of GWI, or you are an independent member of GWI	\overline{I} , you may include among the three the President of
yo	our Federation or Association as a recommender.	

No.	Full Name	Status	How long
1.			
0			
2			
3			

7. Work experiences	/activities: List up to three work	experiences/activit	ties in reverse chronological orde	er, with the most recent one at a top.
Period in	Place of Work (name of	Position/Title	Brief description of work	
descending order	university, institute, company)	1		
_				_
3. Have you ever bee	en in Japan for more than 3 mon	ths to do study/res	earch before this application?	
How many times?	() times Your	last stay from:(y	rear) (month) to (year) (month)
9. Proposed dates of	arrival in and departure from Ja	npan:		
Arrival: 2024		Dena	rture: <u>2025</u>	
year	month d	lay	year	month day
	nancial aids you are applying for	during the same p	eriod as your stay in Japan:	
Name of Fund				Date of Result Announcement
-	on in Japanese Currency:			
Round trip b	etween Tokyo and		Estimated cost:	yen

11. Budget l	Estimation in	n Japanese	Currency:				
_	_		_		_	_	

Round trip between Tokyo an	nd	Estimated cost:	 _yen
Cost to pay to your host instit	cute. (Please consult your host supervisor):		
Entrance fee (if any)	ye	n	
Tuition or the like	770	n	

12. Signature and Date: By submitting this form you certify that all the information provided on this form is complete and correct to the best of your knowledge $\,$

Signature (full name):	Doto:
Signature (tuli name)	Date: