## Japanese Language Program (JLP) Application Form for Admission-Fall 2021

Application Deadline: April 15, 2021 (Japan Standard Time)

Please complete this form in English.

\*Handwritten forms (except signatures and items which are required to be handwritten) will NOT be accepted.

	Last(Family) First(Given)		Given)	Middle(Given)			
Name							
(Roman Alphabet)							
,	*Dlagge spall avaetly the						
	*Please spell exactly the	First(C			_		
	Last(Family)	11131(C	oiveii)	Middle(Given)			
Name (Katakana)							
	*This Katakana name will be registered into the KCUFS student system and any further changes						
	will not be accepted.	y c					
Sex	☐ Male ☐ Female			1			
Nationality				Age			
	Year Month			-			
Date of Birth	Year	IVIO	ntn	Day			
Date of billi							
	Name of University/College		Name of Faculty, Department or School				
	Trainie et etilit			Name of recardy, Department of School			
Home							
University/College	Ma	Major		Minor			
, ,		,					
Present Academic	Undergraduate	□1st Yea	r □2nd	Year □3rd Year	□4th Year		
Status	Graduate						
Academic Status as					□4th Year		
of September 2021	Graduate	□M1 □	JM2 □I	D1			
F +   \/	Year			Mo	onth		
Expected Year and Month of							
Graduation	* If you are expected to graduate from your home university before or during your stay at						
Graduation	KCUFS, you are <b>not eligible</b> for this program.						
Proposed Period of	eriod of   1 Semester  2 Semesters  Spring Semester (April – July/August), Fall Semester (September – Februa						
Study					tember – February)		
First Language	*The applicant's English prof	icioney should	d bo oquivala	ant to the following secres:			
	*The applicant's English proficiency should be equivalent to the following scores: TOEFL iBT 60, IELTS 4.5 or CEFR B1						
	Applicants are rec	ujostod to	provido	information if thou	aava spacial paads		
	Applicants are requested to provide information if they have special needs during their stay at KCUFS. This information will only be used to cater for such						
	needs.						
Special Needs	☐ I do not have special needs						
special needs				□Wheelchair/ □Dys	levia/		
	☐ I have special needs			□Blind (Partly Sighted)			
				☐Deaf (Impaired Hearing)/			
				☐Mental Health Diffi	culties/		
				Other( )			

## **Contact Information**

Email Address	Main Email address	:heck		
Email Address	Alternative Email Address			
Mar Transport		ddress to send important anent address where yo	documents. u can receive documen	ts from KCUFS.
Mailing Address	Address			
Person to Contact	Postal Code		Phone	
	Name			
	Relationship		Occupation	
	Address			
in Emergency	Postal Code		Phone	
	Email			
	Signature			
Dassaget Data	Passport Number		Issuing Authority	
Passport Data	Date of Issue		Date of Expiration	
information in this app	e for my educational a e due date. I will imm	and living expenses d		S, and I agree to pay
Applicant's Name		Т	T	
Date		Signature		
Applicant's	Study Abroad Ac	lvisor or Academi	c Advisor at Home	University
Name			T	
Position			Phone	
Email				
Date		Signature		
Please send this applic through your home un		ner required documer	nts by Email to the follo	wing address

Kobe City University of Foreign Studies

International Office

Email: JLP@office.kobe-cufs.ac.jp (Inquiries welcome)

\*Your application must be received no later than April 15, 2021 (in order to be eligible for the Fall semester, 20**21**).

 $^{\star}$ Screening of the applicants will **take place** after the application deadline. Notifications will be sent by email to each applicant by May 31, 2021.

Questionnaire on Applicant's Japanese Language Background

Experience of Japanese Language Study						
Total Study Period			Hours in Total			
	years and months		hours			
		Period			ek Textbooks Used	
Name of Institution (Country/City)	Type of Study	From YYYY	From YYYY MM Hours per We			
		To YYYY	MM			
	☐ University ☐ Language School ☐ Self-study ☐ University					
	☐ Language School ☐ Self-study					
	☐University ☐Language School ☐Self-study					
	University Language School Self-study					
	Level	Total Score Date Taken (YYYY/MM/		YYY/MM/DD)		
Japanese-Language Proficiency Test (JLPT)	□Passed *Please atta	ach a copy of	the certific			
	El assed Hease and	3011 d 00py 01	tiro cortin		, G	
Do you accept that in KCUFS's JLP there is no lower elementary level course (corresponding approximately to the JLPT N5 level). (Therefore, we will not be able to accept applicants who are considered to be at this level.)						
Have you ever faced any difficulties during your Japanese classes in the past? If so, please write in detail.						
Do you have any pa when running the cl		-		e us to give special c	consideration	
Do you have any wo in detail.	orries or concerns a	bout living	and stud	ying in Japan? If so,	please explain	

Please answer the following questions:  Why do you want to participate in this program? What are your interests in Japanese culture and language? What do you expect from this program?  Please handwrite in Japanese. You don't need to be afraid of making mistakes in Japanese.