

# Statement of reason for applying

Photograph

4 cm (H)× 3 cm (W)

Please write your name on the backside.

Applicant's name: \_\_\_\_\_  
Last
first
middle

## 1. Academic Background

	Name of school	Location (city, country)	Period of attendance (month/year)	Degree obtained or expected
Elementary School			____/____ to ____/____ (month/year) (month/year)	
Jr. High School			____/____ to ____/____ (month/year) (month/year)	
High School			____/____ to ____/____ (month/year) (month/year)	
College/ University *			____/____ to ____/____ (month/year) (month/year)	
Graduate School *			____/____ to ____/____ (month/year) (month/year)	
Total years of schooling mentioned above as of September 21,2019				_____ years

\* As for undergraduate/graduate schools, please state your Faculty, Department and Major.

Undergraduate: Faculty \_\_\_\_\_  
 Department \_\_\_\_\_  
 Graduate: Course \_\_\_\_\_  
 Major \_\_\_\_\_

## 2. Occupational experience:

List all of your work history

Name of employer	Period of employment (month/year)	Occupation	Location (city, country)
	____/____ to ____/____ (month/year) (month/year)		
	____/____ to ____/____ (month/year) (month/year)		
	____/____ to ____/____ (month/year) (month/year)		
	____/____ to ____/____ (month/year) (month/year)		
	____/____ to ____/____ (month/year) (month/year)		

**3. Language proficiency:**

Native Language: \_\_\_\_\_

Evaluate your abilities using rate on a scale of 3 to 0. 3=Excellent, 2=Good, 1=Fair, 0=Poor

	Reading	Writing	Speaking	Listening	Qualifications (if any)
English					
Others (if any) ( )					

**4. Contact person residing in your home country in case of emergency:**

Full legal name \_\_\_\_\_

Relationship to the applicant \_\_\_\_\_

Street address \_\_\_\_\_

Phone number \_\_\_\_\_

**5. Contact person residing in Japan, if any:**

Full legal name \_\_\_\_\_

Relationship to the applicant \_\_\_\_\_

Street address \_\_\_\_\_

Phone number \_\_\_\_\_

Occupation \_\_\_\_\_

Work address \_\_\_\_\_

Phone number \_\_\_\_\_

**6. Your plan after completing Graduate school of Societal Safety Sciences**

**7. Your reason for applying to Ph.D. of Disaster Management Program at Kansai University**

I hereby certify that all information submitted is true and accurate.

And, I understand and accept all the matters stated in the Application Guidelines, and hereby apply for admission to Kansai University.

Date of application: \_\_\_\_\_

Applicant's signature: \_\_\_\_\_