

Application Form

A) Student Information

Surname / Family name					
First / Given name(s)					
Date of birth	(yyyy/mm/dd)//				
Gender					
Nationality					
Current postal address					
	Postal / Zip code: Country:				
Phone number	+				
	(including country code)				
Mobile phone number	+				
	(including country code)				
E-mail address					
Permanent home address*					
	Postal / Zip code: Country:				
	* If same as current postal address, write "as above".				
Phone number	+				
	(including country code)				

B) Approval of Application by Academic Advisor at Home Institution

Name of home institution	
E-mail address	
	Position:
Academic advisor	Name:
	I certify that the student indicated above is selected and approved as an exchange nominee of our institution.
	Signature:
	Date: (yyyy/mm/dd)//



C) Current Studies at Home Institution

Major of study at home institution:						
□ Undergraduate () year □		Postgraduate () year				
D) Course and Specialty that you	wish to apply a	at KCUA				
□ Undergraduate Course				~		
□ Master's Course / □ Doctoral Co	ourse	Academic Yea	ar : 20 / □ Fall □	Spring Semester		
1) Name of Specialty:						
2) Name of Specialty*:						
3) Name of Specialty*:						
For the specialty description, ple	ease refer to KC	CUA website:		_		
Fine Arts http://www.kcua.ac.jp	<u>s/en/arts_en/</u> N	Ausic http://wv	ww.kcua.ac.jp/en/m	nusic_en/		
*If you have several choices, w	rite in order of	your preference	ce, up to third choice	ce for Fine Arts, or up to		
second choice for Music.						
E) Declaration by Applicant						
I confirm that the above information	on is correct to 1	the best of my	knowledge.			
Name:						
Signature:						
Date: (yyyy/mm/dd)	_//	_				