

Osaka School of International Public Policy, The University of Osaka

Master's Course (Enrollment in April 2026)

Application for Qualifying Review

Date of Application (YYYY/MM/DD) : / / .

To the Dean of Osaka School of International Public Policy, The University of Osaka

<i>Furigana</i>			
Name	(Family Name)	(First Name)	(Middle name)
Date of Birth	/ / (YYYY/MM/DD)	※ <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> N/A	※ <input type="checkbox"/> Fall <input type="checkbox"/> Winter

I hereby submit my preliminary eligibility screening form along with other related documents for application qualification for admission to the Osaka School of International Public Policy Master's Course.

Documents required for an application for qualifying review	※ <input type="checkbox"/> Application materials based on criteria (9) (10) (11)	(a) Application for qualifying review (this form)	1 copy
		(b) Curriculum vitae (use the form provided)	1 copy
		(c) Student registration certificate (*1) (*2)	1 copy
		(d) Academic transcripts from the last school attended	1 copy
		(e) Recommendation letter from a research supervisor (*7)	1 copy
	※ <input type="checkbox"/> Application materials based on criterion (12)	(a) Application for qualifying review (this form)	1 copy
		(b) Curriculum vitae (use the form provided)	1 copy
		(c) Student registration certificate (*2)	1 copy
		(d) Certificate of the degree awarded (if applicable)	1 copy
		(e) Certificate of completion from the last school attended	1 copy
		(f) Academic transcripts of the last school attended	1 copy
		(g) Recommendation letter from a research supervisor (*7)	1 copy
	Nationality (日本国籍の者は都道府県名を記入してください。)		
	Research Title		
Name of your desired supervisor	Your First Choice	Your Second Choice	
Current address and contact information	(〒 -)		
	E-mail:	Tel - - Mobile phone - -	
Other address and information	(〒 -)		
(Please be sure to fill out)	※ <input type="checkbox"/> Parent's home <input type="checkbox"/> Workplace <input type="checkbox"/> Other () Tel - -		

(*1) A certificate of graduation those who have already graduated, and a certificate or voluntary withdrawal should be submitted in the case of voluntary withdrawal, instead of Student Registration Certificates.

(*2) Student Registration Certificates are required for current students only.

(*3) All the information, except “整理番号”, must be completed by the applicant.

(*4) Please tick the appropriate box for the items marked with a ※ symbol.

(*5) Please pay special attention to the contact information, as it will be the address for notification of results.

(*6) Please be sure to fill out the name your desired supervisor, not only your first choice, but also your second choice.

(*7) A recommendation letter from a research supervisor is optional.

Curriculum Vitae

大阪大学大学院国際公共政策研究科博士前期課程

学歴 Academic Background	教育課程	Name of School (Country or Region of Location) [Standard Period of Study (正規の修業年限)]		入学・卒業の年月		
	初等教育 (小学校) Elementary School			Enrollment 入学	YYYY MM 年 月	
		(国) [年]		Graduation 卒業	YYYY MM 年 月	
	中等教育 (中学校) Junior High School			入学	年 月	
		(国) [年]		卒業	年 月	
	中等教育 (高等学校) High School			入学	年 月	
		(国) [年]		卒業	年 月	
	歴 Background	高等教育 (大学) University (Undergraduate Level)			入学	年 月
			(国) [年]		卒業 (Expected (見込み) 年 月	
		高等教育 (大学院) University (Graduate Level)			入学	年 月
(国) [年]			修了 (Expected (見込み) 年 月			
					年 月	
		(国) [年]			年 月	
	Total 計 [年]					
歴等 Research History				入 学 年 月 終 了 年 月		
				入 学 年 月 終 了 年 月		
職歴・研究歴 Job History Research History	勤務先・研究機関等の名称/ Name of Employer (Institution) [在籍年月/Period]			期 間		
	[年 月]			自 /From 至 /To	年 月 年 月	
	[年 月]			自 至	年 月 年 月	
	[年 月]			自 至	年 月 年 月	
	[年 月]			自 至	年 月 年 月	
取得した学位 Conferred Degree	学 位 の 名 称/Name of Degree	取得(見込み)年月日/Conferred Date		授 与 機 関 名/Institution		

(注)初等教育から高等教育まで日本で教育を受けた者は、学校の所在国名欄、初等教育(小学校)欄及び中等教育(中学校)欄を省略してもかまいません。