

September 2024 Enrollment

Regular Admission (English-based Program) Graduate School of Life Sciences

Application Documents Checklist:

* Please print all forms double-sided.
* Documents will be accepted as original if they bear the original, authorized seal of the issuing agency (The seal must be original. Photocopied seals will not be accepted).
* All forms and documents must be in English or Japanese or accompanied by an English or Japanese translation.
  1. Application Sheet

\*Must be printed out from “Ritsu-Mate” and attach your facial photograph

* 1. Application Sheet for Non-Japanese Applicants 【University-designated Form GS 1 】
  2. Research Plan Form【University-designated Form SK 1】
  3. Declaration of Financial Resources 【University-designated Form SK 2】
  4. Questionnaire 【University-designated Form SK 3】
  5. Letter of recommendation by the dean, or person of higher position, at the applicant’s school or institution【Free form or University-designated Form SK 4】
     + Not compulsory to submit.
     + Must be addressed to the Dean of the Graduate School of Life Sciences
  6. Original certificate of graduation or expected graduation from the higher education institution you attended, which meets the application criteria

\*Those who cannot submit the original certificate are required to consult it by email. email: [gsls@st.ritsumei.ac.jp](mailto:gsls@st.ritsumei.ac.jp)

* 1. Original certificate/transcript of grades from the higher education institution you attended, which meets the application criteria

\*Those who cannot submit the original certificate are required to consult it by email. email: [gsls@st.ritsumei.ac.jp](mailto:gsls@st.ritsumei.ac.jp)

* 1. Certificate of language ability

( e.g TOEIC® Listening & Reading Test, TOEFL iBT® Test, Revised TOEFL® Paper-delivered Test or IELTS )

\*Copies are acceptable.

* 1. Photocopy of applicant’s passport, if applicable (must show applicant’s picture and name)
  2. Graduates of Chinese institutions : PDF copy of Online Verification Report of Higher Education Qualification Certificate

( graduates of universities in China, only ) or PDF copy of Online Verification Report of Student Record ( students currently enrolled in Graduate School or university in China, only )

Application period: Thursday, April 4, 2024 – Thursday, April 18, 2024

All documents must arrive by express mail on or before the deadline if applicants apply from overseas.

Please allow sufficient time for delivery.

【FORM SK 1-E】

Research Plan Form

Please download a Word file from the following link to fill out. https://en.ritsumei.ac.jp/gsls/application/

In the spaces below please provide a statement of your planned field of study and tentative study plan. Please write in English, do not use abbreviations, and use the Anno Domini system for any dates (e.g. “I graduated in 2007.”)

|  |
| --- |
| Title: |
| Subject: |
| Plan & Method: |

Please refer to the following web site for the researchers to determine the prospective supervising professor. URL: https://[www.ritsumei.ac.jp/gsls/eng/academics/researchers.html/](http://www.ritsumei.ac.jp/gsls/eng/academics/researchers.html/)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Prospective Supervising Professor | Reason | Have you obtained approval for your research plan above? |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

【FORM SK 2】

Declaration of Financial Resources

1. Are you promised to recieve a scholarship from a government, private organization, etc.?
   * YES
   * NO

Please specify the benefactor:

1. If “Yes” above,

・Please specify the scholarship periods: from to

・Please submit proof of the scholarship award or conditional award together with the other application documents.

1. Please indicate the source and amount of funding for the entire duration of your studies at Ritsumeikan:

|  |  |  |
| --- | --- | --- |
| Source of Support | | Amount (in Japanese yen) |
| Personal Savings |  | ¥ |
|  |  |  |
| Parent or Sponsor  \*Please specify: |  | ¥ |
|  |  |  |
| Scholarship |  | ¥ |
| \*Benefactor: |  |  |
|  |  |  |
|  |  | ¥ |
| Others: |  | ¥ |
| TOTAL | | ¥ |

\*Please provide copies of award letters for all private scholarships or bursaries.

I hereby certify that all information submitted is true and accurate and that the stated funds are available for my educational expenses at Ritsumeikan University.

# Applicant’s Signature:

Date: *(Month/Day/Year)*

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【FORM SK 3】

**Questionnaire**

**September 2024 Enrollment Regular Admission (English-based Program)**

**Graduate School of Life Sciences**

INSTRUCTIONS（記入上の注意）

１．The application should be typed. （明瞭に記入してください｡)

２．Numbers should be in Arabic numerals.（数字は算用数字を使用してください｡)

３．Years should be written using the Anno Domini system. （年号はすべて西暦で記入してください｡)

４．Proper nouns should be written in full and not abbreviated. （固有名詞はすべて正式な名称とし，一切省略しないでください｡)

\* Personal data entered in this application will only be used for selection purposes.

(本申請書に記載された個人情報については，選考以外の目的では使用いたしません。）

１．Name in full in native language

，

(Sex)

* Male（男）

（姓名（自国語)) (Family name) (First name) (Middle name)

□ Female（女）

1. Your prospective supervising professor and your contact status （希望指導教員および連絡状況）.

Name of Professor （希望指導教員名） Contact Status （連絡状況） Yes, I have been in contact with this professor.

No, I have not been in contact with this professor.

Specific topic of your research plan （特に○○に関する研究）：

1. Field of specialization studied in the past （Be as detailed and specific as possible.) （過去に専攻した専門分野（できるだけ具体的に詳細に記入してください｡）
2. State the titles or subjects of books or papers (including graduation thesis authored by the applicant), if any, with the name and address of the publisher and the date of publication. （著書，論文（卒業論文を含む）があればその題名，出版社名，出版年月日，出版場所を記載してください｡）
3. Employment Record: Begin with the most recent employment, if applicable. （職歴）

|  |  |  |  |
| --- | --- | --- | --- |
| Name and address of organization  （勤務先および所在地） | Period of employment(YYYY/MM/DD)  （勤務期間） | Position  （役職名） | Type of work  （職務内容） |
|  | From To |  |  |
|  | From To |  |  |

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1. Japanese language proficiency: Evaluate your level and insert an X where appropriate in the following blank space.

（日本語能力を自己評価のうえ，該当欄に×印を記入してください｡）

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent  （優） | Good  （良） | Fair  （可） | Poor  （不可） |
| Reading  （読む能力） |  |  |  |  |
| Writing  （書く能力） |  |  |  |  |
| Speaking  （話す能力） |  |  |  |  |

1. Accompanying Dependents (Provide the following information if you plan to bring any family members to Japan.)

同伴家族欄（渡日する場合，同伴予定の家族がいる場合に記入してください。）

\* All expenses incurred by the presence of dependents must be borne by the grantee. He/She is advised to take into consideration various difficulties and the great expense that will be involved in finding living quarters. Therefore, those who wish to be accompanied by their families are advised to come alone first and let their dependents come after suitable accommodation has beenfound.

（注）同伴者に必要な経費はすべて留学生の負担であり，家族用の住居をみつけることは相当困難であり賃貸料も非常に高額になることを、あらかじめご承知おきください。留学生はまず単身で来日し、適当な住居をみつけた後、家族を呼び寄せることをおすすめします。

|  |  |  |
| --- | --- | --- |
| Name  （氏 名） | Relationship  (続 柄) | Age  （年 齢） |
|  |  |  |
|  |  |  |
|  |  |  |

1. Person to be notified in applicant’s home country in case ofemergency:

(緊急の際の母国の連絡先)

* 1. Name in full:

（氏 名）

* 1. Address: with telephone number, facsimile number, email address

（住所：電話番号，ファックス番号および E-mail アドレスを記入してください｡）

現住所 (Present address)：

電話番号/FAX 番号 (Telephone/Facsimile number）： Email address：

* 1. Occupation:

（職 業）

* 1. Relationship:

（本人との関係）

1. Immigration Records to Japan （日本への渡航記録）

|  |  |
| --- | --- |
| Date（日付） (YYYY/MM/DD) | Purpose （渡航目的） |
| From To |  |
| From To |  |

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I understand and accept all the matters stated in the Application Guideline for September 2024 Admission, and hereby apply for admission to Ritsumeikan University.

Date of application:

（申請年月日）

Applicant’s signature:

（申請者署名）

Applicant’s name

（in Roman block capitals）：

（申請者氏名）

【FORM SK 4】

Letter of Recommendation

To the Recommender:

The candidate named below has applied for admission to a Master’s/Doctoral program at Ritsumeikan University. Please complete this form to aid us in our assessment of the candidate. Once completed please seal the form in an envelope and return it to the candidate. Thank you.

Applicant’s Name:

*(Family) (First) (Middle)*

Please comment on the candidate’s academic performance, potential, and motivation to the best of your knowledge, including any research or involvement in campus activities. Feel free to add any details that you feel will help us in our evaluation.

## Recommender’s Information

Name: Signature:

Institution: Position: Relationship to

Candidate: Date: