

# Petition for Eligibility Appraisal for Admission Application

Date: \_\_\_\_\_  
(month/day/year)

President, Kyushu Institute of Technology

I hereby petition you for eligibility certificate of admission application for the Department of \_\_\_\_\_, Graduate School of Life Science and Systems Engineering, Kyushu Institute of Technology, with attached documents required.

Full Name : \_\_\_\_\_  
(Last Name, Given Name)

Date of Birth: \_\_\_\_\_  
(month/day/year)

Nationality: \_\_\_\_\_

Current Domicile: \_\_\_\_\_  
(Mailing Address)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

## Résumé for Eligibility Appraisal for Admission Application

✘

**for the Department of the**

- Biological Functions and Engineering     Human Intelligence Systems  
 Life Science and Systems Engineering  
 (check one)

Full Name: \_\_\_\_\_  
 (Last Name, Given Name)

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_  
 (month/day/year)

Mailing Address: \_\_\_\_\_

Current Occupation: (Full-Time Employment Only)

Company/Organization: \_\_\_\_\_

Dept/Div/Sec: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_

**Education:** (List from the Secondary Education)

Dates (month/year)	Institution	Location (city, province, country)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Total number of years of formal institutional education (including primary education): \_\_\_\_\_ years

**Employment:**

Dates (month/year)	Institution	Location (city, province, country)
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Other Credentials:** (List distinctions, honors, qualifications, licenses, if any)

Dates (month/year)	Credential	Issuing Agency
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

## Research Experiences and Citations

for the Department of the

Biological Functions and Engineering  Human Intelligence Systems

Life Science and Systems Engineering

(check one)

Full Name: \_\_\_\_\_  
(Last Name, Given Name)

Final Education: \_\_\_\_\_  
(College/University, Faculty/School, Department/Major)

This form is to be filled if applicable. If not, submit this form with "N/A" written below.

1. If you have any research experiences and/or publications, describe and/or list them.
2. If you are/were a member of any academic/scientific societies, list them and describe your activities/involvements.
3. Attach a certificate or photocopy of credentials you have listed in Form 2/3.
4. If you have completed any extramural/vocational courses/training of more than one month offered by industrial organizations/institutions, describe them and provide a proof/photocopy of their completion.

## STATEMENT OF PURPOSE

**APPLICANT'S FULL NAME:** \_\_\_\_\_  
(in roman alphabets as it appears in Application Form)

**APPLICATION**

for       Master's Program                       Doctoral Program      

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\_\_\_\_\_ selection for the academic year 20\_\_\_\_ Term;    April-March   or    October-September

**PREFERENCES FOR THE MAJOR AREA OF STUDY**

1<sup>st</sup> preference: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

2<sup>nd</sup> preference: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

3<sup>rd</sup> preference: \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

department    division    supervisor's name

*State your reasons for applying, and explain your study and research interests and their relation to your previous academic experiences and/or future professional/academic goals. Use a point-typeface 12 point.*

*Signature:* \_\_\_\_\_.

*Date* \_\_\_\_\_