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| Office Use |  |  |

**Application of Prequalification for Entrance Examination**

**Special Selection for Foreign Students / Special Selection for Working Adult**

**Graduate School of Science and Engineering, Shibaura Institute of Technology**

To: The president, Shibaura Institute of Technology

Date　　 ：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name　　：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthday　：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As I wish to sit for Entrance Examination of Master’s Program (Major in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_), Graduate School of Engineering and Science, Shibaura Institute of Technology, I hereby ask you to apply prequalification with following documents required.

1. **Documents required**
2. Application of Prequalification for Entrance Examination（This document）
3. Personal Sheet
4. Certificate of Graduation/Enrollment of applicant’s affiliated school
5. Transcript of the applicant’s affiliated school
6. Research Plan and Schedule
7. Achievement Report or equivalent
8. References that support (6): Research Papers and Books
9. **Contact point of the applicant:**

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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1. **Contact point with the Prequalification results**

**(Only when it is different from Contact Address)**

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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