

Exam No.

## SAKU UNIVERSITY Master's Program in Nursing Science Application Form

Send this form by mail service to SAKU UNIVERSITY Office of Admission; Iwamura 2384, Saku City, Nagano, Japan, 385-0022

Please Type or Print Clearly.

Check your field of specialization	<input type="checkbox"/> International Nursing <input type="checkbox"/> Nursing Education <input type="checkbox"/> Nursing Administration <input type="checkbox"/> Maternal & Child Health Nursing <input type="checkbox"/> Adult Health Nursing <input type="checkbox"/> Gerontological & Psychiatric Nursing <input type="checkbox"/> Community Health & Home Care Nursing
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Attach photo here  
Front, Bust, No cap, &  
No background  
Size: Height 4 cm x  
Width 3 cm  
Photo must be taken  
within last 3 month.

1. FULL LEGAL NAME

Last/Family \_\_\_\_\_ First \_\_\_\_\_ Full Middle \_\_\_\_\_

2. GENDER Female Male

3. BIRTH DATE Day / Month / Year

\_\_\_\_\_

4. CURRENT MAILING ADDRESS

City/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/ Postal Code \_\_\_\_\_

Current Telephone \_\_\_\_\_ Country Code \_\_\_\_\_ Area Code ( )

5. PERMANENT MAILING ADDRESS

City/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/ Postal Code \_\_\_\_\_

Permanent Telephone \_\_\_\_\_ Country Code \_\_\_\_\_ Area Code ( )

6. EMAIL ADDRESS

7. CITIZEN STATUS OR VISA TYPE

Japanese Permanent Resident  Student's Visa  Visitor's Visa  Working Visa

Other Visa (specify) \_\_\_\_\_

8. SUMMARY OF COLLEGE/UNIVERSITY ATTENDANCE IN ENGLISH. Provide an official transcript from each institution. List actual name of degree received or expected. DO NOT translate or interpret in terms of Japanese or U.S. equivalent.

FULL NAME OF INSTITUTION (Do not use initials)	LOCATION (city province country)	ENTERED (MM/YY)	THROUGH (MM/YY)	MAJOUR or PROGRAM OF STUDY	NAME OF DEGREE or DIPLOMA RECEIVED or EXPECTED	DATE RECEIVED or EXPECTED (MM/YY)

9. SUMMARY OF WORKING HISTORY

FULL NAME OF INSTITUTION (Do not use initials)	LOCATION (city province country)	ENTERED (MM/YY)	THROUGH (MM/YY)	JOB DESCRIPTION

10. SUMMARY OF RESEARCH ACTIVITIES AND PUBLICATIONS

11. How did you learn about SAKU UNIVERSITY MASTER'S PROGRAM in NURSING SCIENCE? Check as many as you learn from.

- SAKU UNIVERSITY Home Page       Other Web site       SAKU UNIVERSITY faculty
- Other Faculty recommendation       College/University Guide       Family
- Friend       Other \_\_\_\_\_

12. What languages do you speak?

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13. Standard Testing

Japanese score (ex.JLPT) \_\_\_\_\_ TOEFL Score \_\_\_\_\_

14. APPLICANT'S CERTIFICATION

I certify that the responses provided on the SAKU UNIVERSITY Master's Program in Nursing Science Application Form are complete and true to the best of my knowledge and belief. I understand that providing incomplete, incorrect, or false information may result in the rescission of admission.

Signature \_\_\_\_\_ Date \_\_\_\_\_