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**Application for a doctoral exchange place  
at the Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, Okayama University**

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| **Family name** | |  | | Photo |
| **First name/s** | |  | |
| **Male/Female** | |  | |
| **Nationality** | |  | |
| **Current semester** | |  | |
| **Current address** | |  | |
| **e-mail** | |  | |
| **Phone number/s** | |  | |
| **Proposed period of stay** (complete months!) | | -  month/year - month/year | |
| **Research Theme:** | | | | |
| **Language competence (1: excellent …………..5: poor)** | | | | |
| English | 1  2  3  4  5  none | | | |
| Japanese | 1  2  3  4  5  none | | | |
| **Engagement** | | | | |
| **Extracurricular interests and activity** | | | | |
| **Past stay in Japan** | | | | |
| Place | | | Year | |
| Purpose | | | | |
| **Scholarship grant to be expected from:** | | | | |
| **Please submit the filled application form with the following documents:**  Motivation letter (English)  Curriculum (English)  Transcript of Records (English)  Copy/ies of the 1st (& 2nd, & 3rd) State Exam/s  Research Plan in Japan (please use the form below)  Letter of Recommendation of doctoral supervisor (original)  Confirmation letter of research supervisor at Okayama University | | | | |

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| --- | --- |
| **Family name** |  |
| **First name/s** |  |
| **Proposed period of stay** (complete months!) | -  month/year - month/year |
| **Research Plan in Japan:**  Background of proposed research in Japan  Purpose of proposed research  Proposed Plan  Expected results and impacts  Subject and Achievement of Past Research | |
| **List of Publications** | |