

**AOYAMA GAKUIN UNIVERSITY**  
**College of Science and Engineering**  
**Short Term Internship Program 2020**  
 APPLICATION FORM

Photo

**1. Applicant Information ①**

<b>Applicant's Name</b> (on passport)	<b>Family Name</b>	<b>Given Name</b>					
<b>Name in Another Language</b> (if applicable)	Family Name	Given Name					
<b>Home Institution</b>							
<b>Major</b>							
<b>Status</b>	Undergraduate	1 <sup>st</sup> <input type="checkbox"/>	2 <sup>nd</sup> <input type="checkbox"/>	3 <sup>rd</sup> <input type="checkbox"/>	4 <sup>th</sup> <input type="checkbox"/>	Master <input type="checkbox"/>	Doctor <input type="checkbox"/>
<b>Nationality</b> (on passport)					<b>Gender</b>	Male <input type="checkbox"/>	Female <input type="checkbox"/>
<b>Date of Birth</b>	MM/DD/YYYY	<b>Age</b>					
<b>Passport No.</b>				<b>Expire Date</b>	MM/DD/YYYY		
<b>Present Address</b>	Address						
	Phone No.						
<b>Home Address</b>	Address						
	Phone No.						
<b>Email Address 1</b>	@						
<b>Email Address 2</b>	@						
<b>Language</b>	Japanese <input type="checkbox"/> English <input type="checkbox"/> Others ( )						
<b>If you Check "Japanese" above, Your Japanese Proficiency</b>	Beginner <input type="checkbox"/>		Intermediate <input type="checkbox"/>		Advance <input type="checkbox"/>		

**2. Applicant Information ②**

**Preferred Laboratories in AGU(Fill out the name of professors)**

**No.1** **No.2** **No.3**

<b>Your GPA</b>	( )Point Scale		
<b>Expected Arrival Date</b>	MM/DD/YYYY	<b>Expected Departure Date</b> MM/DD/YYYY	
<b>Financial Information</b>	Your funds ¥	Funds from parents, relatives ¥	Funds from university ¥

<b>Applicant's Signature</b>	<b>Print Name</b>	<b>Date</b>
	_____	_____