

※ Affiliation	※ Application Number

※For official use only

Application Check List for Credited Auditors (Undergraduate Program) of the University of Tsukuba for AY 2024

Name

Note: Write the number of sheets you submit and check the boxes when you submit the application materials.
Your application will not be accepted if the application requirements and materials fail to be complete.

Materials, Etc.	Number of sheets	✓	Required for	Notes																								
Credited Auditor Application Form (Make sure to fill in your email address)	1		All	Check if applicable. <input type="checkbox"/> I haven't enrolled as a credited auditor before. <input type="checkbox"/> I have enrolled as a credited auditor before.																								
Application fee (Payment must be made before submitting the application. Affix the tear-off portion of the payment receipt of 9,800 yen in the designated section of the Application Form)	1		All	Check if applicable. <input type="checkbox"/> Have paid at a convenience store. <input type="checkbox"/> Have paid by credit card.																								
Course Application Form (If applicants would like to take courses for multiple programs, Course Application Forms should be separately submitted.)			All	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>①</td><td>②</td><td>③</td><td>④</td><td>⑤</td><td>⑥</td><td>⑦</td><td>⑧</td><td>⑨</td><td>⑩</td><td>⑪</td><td>⑫</td> </tr> <tr> <td style="height: 15px;"></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table> Check the application forms to be submitted from ① to ⑫ by organization. Make sure that you have filled in all required sections and the course number is correct.	①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩	⑪	⑫												
①	②	③	④	⑤	⑥	⑦	⑧	⑨	⑩	⑪	⑫																	
Academic Transcript from Last School Attended			All (Except those who are continuously applying from the previous year)	Must be original																								
Documentary Evidence of a Change of Name (Abstract of Family Register)			If your current family name is different from that on your submitted transcript, submit the proof of name change.	Must be original																								
Residence Card (photocopy, both sides) or Certificate of Residence (住民票 original, without the My Number written on it)	1		International applicants	International applicants must submit either a photocopy of the Residence Card (both sides) or original copy of the Certificate of Residence (without the My Number written on it). Status of residence after enrollment <input type="checkbox"/> With change <input type="checkbox"/> No change																								
Interview Form for International Applicants	1		International applicants	Check interview date, time, etc.																								
Certificate of Japanese Proficiency			International applicants *Except if the course you would like to apply is fully taught in a foreign language.	Photocopy will be accepted.																								
Photo Mount Sheet for the Student ID Card	1		All	Designated form																								
Return (Self-addressed) Envelope (no stamps required)	1		All																									
Application Check List	1		All	Designated form																								

**Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024**

• The fields marked with ※ should be left blank.

※Acceptance No.	※ Affiliation

(Photo)

30mm×24mm

Headshot with no hats

Write your name on the backside of the

Name in Kana	
Name in English	
* Name	
M	F
Date of Birth (YYYY/MM/DD)	/ /
Place of Registry (Prefecture) or Nationality/Region	

* If you are an international applicant, write your name in alphabet as written in

Present Address	〒	—							
			Mobile Phone	-	-				
			Email	TEL	-	-	(C/O:)		
Address (If there are any changes to)	〒	—	(Fill out this column only if your address changes by the time of admission.)						
			Mobile phone	-	-				
			Email	TEL	-	-	(C/O)		

Have you ever been enrolled as a credited auditor in the University of Tsukuba before?

Yes • No	School/College :	School/College :
	Enrollment Period :	Enrollment Period :
	Student ID Number :	Student ID Number :

Academic Record	Y	M	Entered	High School
	Y	M	Graduated	High School
	Y	M		
	Y	M		
	Y	M		
	Y	M		
	Y	M		

Employment History	Y	M	
	Y	M	
	Y	M	
	Y	M	
	Y	M	
	Y	M	
	Y	M	

Your employer or school at the time of admission

<input type="checkbox"/> Company employee <input type="checkbox"/> Self-employed business <input type="checkbox"/> Public service <input type="checkbox"/> Unemployed <input type="checkbox"/> Others	Employer name, office address, and phone number TEL - -	<input type="checkbox"/> Graduate school <input type="checkbox"/> Undergraduate school <input type="checkbox"/> Junior college <input type="checkbox"/> Vocational school <input type="checkbox"/> Others	School name, etc. (affiliation/year) ※If you are a student of the University of Tsukuba, please write your affiliation and student ID number. (*includes research
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① Course Application Form for Credited Auditors (Undergraduate Program) of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For Common Foundation Subjects
(Course Number starting with "2", "3", "4", "5", "6", "8")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

② Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Courses of School of Humanities and Culture
(Course Number starting with "AA", "AB", "AC", "AE")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

⑤ Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Courses of School of Life and Environmental Sciences
(Course Number starting with "EA", "EB", "EC", "EE")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

⑦ Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Courses of School of Informatics
(Course Number starting with "GA", "GB", "GC", "GE")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

⑨ Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Courses of School of Physical Education, Health and Sport Sciences
(Course Number starting with "W")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

⑪ Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Teaching Profession Subjects
(Course Number starting with "90~98")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

⑫ Course Application Form for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024

※Acceptance Number

※Affiliation

Name

For the Museum Subjects
(Course Number starting with "99")

Course Application											
Course Number					Course Name	Credits	Semester	Day and Period	Instructor	※ conditional course	※ Results
Total					Course(s)	Credit(s)					

The fields marked with ※ should be left blank.

※ Affiliation	※ Acceptance Number

**Interview form of International Applicant for Credited Auditors (Undergraduate Program)
of the University of Tsukuba for AY 2024**

Name in Kana		Date of Birth (YYYY/MM/DD)	Nationality
Name of Applicant		/ /	
Length of residence in Japan	Year(s)	Month(s) (As of _____,)	
Status of residence			
Expiration date of your period of stay	Y	M	D
Reason for Applying to the credited auditor's program			
What are you going to do after you finish studying as a credited auditor?	<input type="checkbox"/> Go back to my country <input type="checkbox"/> Plan to go to graduate school (Please write the name of the University, Faculty, Department, Program, etc.) <input type="checkbox"/> Get a job <input type="checkbox"/> Other ()		
Have you ever been enrolled in University of Tsukuba as a regular student?	1. Yes, I am a current student. 2. Yes, I am a former student. 3. No, I have never been a regular student at university of Tsukuba.	* If you answered "1" or "2", please write your affiliation and academic advisor's name.	

* The international applicants must only fill in the frame hemmed in by the thick lines.

※ 面接者記入欄

年 月 日

日本語能力の所見 <small>*専ら外国語で行う科目のみを履修する場合は該当しない。</small>	聞く力 (優・良・可・不可) 話す力 (優・良・可・不可)	優: コミュニケーションが問題なくとれる 良: 概ねコミュニケーションがとれる 可: 何とかコミュニケーションがとれる 不可: コミュニケーションがとれない
	特記事項	
日本滞在中における経費支弁方法	国からの送金・預貯金 その他 ()	
その他		
面接者 所属: 学群 学類 氏名: 印		

Address Sheet
for Sending Application for Credited Auditors
of the University of Tsukuba

Please print out the address sheet on the next page, fill in the required information, affix it to a 332 x 240 mm envelope, and send it by registered mail.

Notes:

- Check the Application Guidelines carefully to understand the application process including application materials and application period, etc.
- Application will not be accepted in case of any incomplete documentation and/or application delivered after the application period.
- Write your address and name in the SENDER column on the address sheet.
- This sheet cannot be used to apply for the extra course. Please submit the Application Form for the extra course to the Academic Service Office.

郵便局の
窓口へ
Stamp

簡易書留
Registered Mail

3 0 5 - 8 5 7 7

1-1-1 Tennodai, Tsukuba-shi, Ibaraki, Japan

茨城県つくば市天王台 1 丁目 1-1

To:

Educational Reform Support (Credited Auditor Application),
Department of Educational Promotion,
University of Tsukuba

筑波大学教育推進部教育機構支援課
(科目等履修生受付係) 宛

※CREDITED AUDITOR APPLICATION ENCLOSED

※科目等履修生出願書類(学群)在中

SENDER (差出人)	
Address 住所	〒 TEL:
Name 氏名	