※ Affiliation	※ Application Number

※Office use ONLY

AY2023 Credited Auditor's Program in University of Tsukuba Application Check List (Graduate program)

Name	

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

Documents	Number of sheets	~	Required for	Note
Credited Auditor Application Form (Make sure to fill in your E-mail address)	1		All	Check in the applicable box below. I haven't enrolled as a credited auditor before I have enrolled as a credited auditor before
Application fee (Payment must be made before submitting the applicaton. Affix the tear-off portion of payment receipt of 9, 800yen in the designated section of Applicatoin form)	1		All	Check in the applicable box. ☐ Have paid at a convenience store ☐ Have paid by a credit card
Course Applicatoin Form			All	Make sure that you have filled in all required section and the course number is correct.
Interview Form (Each one copy for subjects that require an interview)			If applicable * Only for subjects that require an interview.	Designated form After checking whether or not there is an interview in the "Course list" and "Selection Methods", submit it for each course (fill in the bold frame).
Academic transcript			All (Except those who are continuously apply from the previous year)	Must be original
Documentary evidence of a change of name (e.g. 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 Jumin-hyou, original, without my number written on it)	1		International applicants	International applicants must submit either of photocooy of Residence card (both sides) or original copy of Certificate of residence (without my number written on it). Status of residence after enrollment □With change □No change
Certificate of Japanese proficiency			International applicants *Except if the coruse(s) you would like to apply is fully taught in foreign language.	Photocopy will be accepted
Interview form of International Applicant	1		International applicants	
Photo Mount Sheet for the Student ID Card	1		All	Designated form
Self addressed envelope without stamps (332 X 240mm) *Clearly write your Name, Zipcode and Address	1		All	
Application Check List	1		All	

AY2023 Credited Auditor's Program in University of Tsukuba (graduate) Application Form

• I he		<u>marked with :</u> ceptance No.		be left blank.	Affiliation	า		(Photo)]
								30mm × 24mm Headshot with no hats.	
Name	in Kana							Write your name on the backside of the	
	in Engish							photo	
*	ame						M F	* If you are a international applic	cant,
D	ate of I	<u> </u> Birth (YYYY/I	MM/DD)		/	/		 write your name in alphabet as writter 	
				<u> </u>	gion	<u> </u>		your passport.	1111
		〒 -	-					<u> </u>	
	sent						Mobile phon	ne – –	
Address							Tel	(0.40	,
		E−mail 〒 −		(Fill out this co	olumn only	, if your addr	ess change	(C/O: s by the time of enroll) Iment)
	dress ne time			(i iii oat tiiis o		, ii your addi	Mobile phor		
	ollment	E-mail						(C/O:)
Have	you e			Graduate Cred	lited Aud	itor's Progr	am in Unive	ersity of Tsukuba be	fore?
Yes	No	School/Colle	-			School/Coll			
		Enrollment P				Enrollment F			
-		Student ID N				Student ID I	Numbe _l :		
			Υ	M Entered				Highsc	hool
			Υ	M Graduated				Highsc	hool
١.			Υ	M					
	demic cord		Υ	М					
			Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
Empl	oymen		Υ	M					
	story		Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
			Υ	M					
			Your	employer or so	chool at t	he time of e	enrollment		
☐ Sel		red business and vice		e, Office Adress mber	☐ Underg☐ Junior	raduate school	XIf you are please write y	e etc.(Faculty etc. / Gra a student of University of Tsu our affiliation and student ID r include research student)	ukuba,
□ Ot	hers	Tel	_	_	☐ Others	5			

Graduate credited Auditor's Program

X	Acceptance Number

The fields marked v	vith 💥 should be left	blank.				
*		Name in Kana			M.	
Affiliation		Name			M	F
Subject Period *Put a circle	Annual (Spring term• Fall term)	Spring term ONLY	Fall term ONLY	ŗ	fix the tea portion of Ficate of I	the
	Purpose	of Study				
☐ To get a degree☐ ☐ To aquire a qua	e (Name of th)	applic refer "4. A	to pplication pplication	e, please on fee″
Others				affix t portio Certif	he tear- n of the icate of ent with	

Japanese	Test Name	Score /Grade / Level	Test Date(YYYY/MM)
Proficiency (Only			/
International			/
Applicants)			/

Write your results of Japanese proficiency tests (such as "JLPT Japanese-Language Proficiency Test", "BJT Business Japanese Proficiency Test", "J.TEST", etc.) and attach the certificate of the results (copies acceptable).

AY2023 Credited Auditor's Program in University of Tsukuba (Graduate) Course Application Form

XAcceptance Number → Number	※ Affliation	Name

The fields marked with X should be left blank.

To find out if an interview is required, please contact the respective organization listed in the "Selection Process" section. Please put a check () after confirming the interview for all courses.

Course Number			ber	Course Name	Credits	Term	Weekday and Period	Instructor	Interviewed in advance (Note:2)	※ Results	
Total				Course(s)	(Credit(s)					

(Note:1): If there are many subjects, please make a copy of the required number.

(Note:2): If you have had an interview for the subject you are applying for, please check (\checkmark) the box for "Interviewed in advance".

Purpose of Study *Please give as much detail as possib	ole

*Affiliation	XApplication Number

Applicants must only fill in the frame hemmed in by the thick lines.

AY2023 Credited Auditor's Program in University of Tsukuba (Graduate) Interview form

Name in Kana		Course Number			
Name of Applicant		Course Name			
	Affiliation	Title		Name	
Interviewer					印
説明を受けました	顧書・成績証明書等に基づき配 こ。	 面接を実施し, 出願理E	ーーーーー	 事項等についての	ת
所 見					
					-
					_
					-
					-
					-
					-
					-
受講の可召	§		年	月 日	

※所見等記載済の面接票は出願者に返却せず、支援室へ送付願います。
※面接者は、出願理由及び当該授業科目を履修できる学力があるかどうか等について、詳細に記載願います。

Affiliation	※ Acceptance Number

年

月

日

AY2023 CreditedAuditor's PrograminUniversityof Tsukuba (Graduate) Interview form of International Applicant

Name in Kana			Date of Birth (\	(YYY/MM/DD)	Natio	nality
Name of Applicant			/	/		
_	of residence in Japan	Year(s)	Month(s) (As of	, 2023)
Status	of residence					
-	ation date of eriod of stay		Y M	D		
the cred	or Applying to dited auditor's rogram					
do afte studying	e you going to er you finish as a credited uditor?	☐ Go back to my ☐ Plan to go to g ☐ Please write the no ☐ Get a job ☐ Other	-	culty, Department, Pro	ogram, etc.)
-	ver been enrolled in f Tsukuba as a ent?	1.Yes, I am a curr 2.Yes, I am a form 3.No, I have never student at universit	nar student. r been a regular	* If you answered affiliation and acar		
		* The internation	onal applicants must c	only fill in the frame	hemmed in by t	he thick lines.

V	面接者記入欄	
.v.		

		優:コミュニケーションが問題なくとれる
日本語能力の所見	聞くか力(優・良・可・不可)	良:概ねコミュニケーションがとれる
	話 す カ(優・良・可・不可)	可:何とかコミュニケーションがとれる
* 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。		不可:コミュニケーションがとれない
と腹形がの物口は欧当じない。	特記事項	
	무 나는 하 본 소 프라스	
日本滞在中における	国からの送金・ 預貯金	`
経費支弁方法	その他	
		<u> </u>
その他		
面接者		
所属:	研究群/専攻	学位プログラム
	-	
氏 名:	印	

*	所 属	*	番	号
		A		

Photo Mount Sheet for the University of Tsukuba Student ID Card

Name Date of birth	- 写真貼付欄	3
	24mm	

Important notes:

- 1. Glossy ID photo (NOT matte finish type)
- 2. Must be taken within the last three months; 30mm×24mm; Full face; Front view; Bareheaded against a plain light colored background; Write your name on the back of ID photo
- 3. If you would like to use the photo taken with digital camera, make sure that must be printed on the photo paper.
- 4. Use a solid type paste

Address Sheet (Tsukuba campus) For sending Application for Credited Auditor University of Tsukuba

Please print out the address sheet on the next page, University's address and other required information are written on the sheet. Fill in the required fields and affix it to an envelope when submitting the application documents.

Note:

- 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 applications delivered after the application period.
- Write your address and name in the SENDER column on the address sheet.



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,

Department of Educational Promotion,

University of Tsukuba (Credited Auditor Application)

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

- **XCREDITED AUDITOR APPLICATION ENCLOSED**
- ※科目等履修生出願書類(大学院)在中

SENDER(差出	4人)
Address	〒
住所	
	TEL:
Name 氏名	

Address Sheet (Tokyo campus) For sending Application for Credited Auditor University of Tsukuba

Please print out the address sheet on the next page, University's address and other required information are written on the sheet. Fill in the required fields and affix it to an envelope when submitting the application documents.

Note:

- 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 applications delivered after the application period.
- Write your address and name in the SENDER column on the address sheet.



簡易書留

Registered Mail

1	1	2	_	0	0	1	2
---	---	---	---	---	---	---	---

3-29-1 Otsuka, Bunkyo-ku, Tokyo, Japan

東京都文京区大塚 3-29-1

To

Academic Service Office for the Business Sciences Area,
University of Tsukuba (Credited Auditor Application)
筑波大学社会人大学院等支援室
(科目等履修生受付係) 宛

- ****CREDITED AUDITOR APPLICATION ENCLOSED**
- ※科目等履修生出願書類(大学院)在中

SENDER(差出人)			
Address	〒		
住所			
	TEL:		
Nama			
Name 氏名			
八石			