

To: the Dean of Graduate School of Dental Medicine, Hokkaido University

Date: _____ / _____ / _____
Year month day

Application for the preliminary examination of the applicant's eligibility

I submit the prescribed documents for the preliminary examination of the applicant's eligibility.

Name of Applicant (Signature)

Please check the statement applicable to you, attach necessary documents with the application form;

- 1) Individuals who have completed 18 years of school education (ending with dentistry, medicine, pharmacology or veterinary) of that foreign country at an educational institution in Japan. The institution needs to be positioned within the school education system of that foreign country as an educational body with a university course and is required to be designated by the Japanese minister of education, culture, sports, science, and technology. This includes those who expect to be such a degree by March 2020.
- 2) Individuals who have received or expect to receive a degree equivalent to a bachelor's degree from a university or a school in a foreign country upon completion of a program or a course of study in Medicine, Dental Medicine, Veterinary Medicine or Pharmacology requiring 5 or more years (including completion of a correspondence course of a foreign institute taken in Japan, and completion of a course of study designated in the preceding item at an overseas educational establishment within the public education system of the country concerned) by march 2020.
- 3) Individuals who have been designated by the minister of education, culture, sports, science and technology (See note below.)
- 4) Individuals who have attended a university for four years or longer (including the coursework in dentistry, medicine, pharmacology or veterinary) or who have completed 16 years of school education (including the coursework in dentistry, medicine, pharmacology or veterinary) in a foreign country, or 16 years of school education (including the coursework in dentistry, medicine, pharmacology or veterinary) in Japan by taking a correspondence course offered by a foreign school and who have been deemed by this graduate school to have obtained the number of credits prescribed by Hokkaido University with excellent grades.

Also individuals who have completed 16 years of school education (including the coursework in dentistry, medicine, pharmacology or veterinary) of that foreign country at an educational institution in Japan, and who have completed with academic records approved by the graduate school. The institution needs to be positioned within the school education system of that foreign country as an educational body with a university course and is required to be designated by the Japanese minister of education, culture, sports, science, and technology.

- 5) Individuals who are recognized as possessing the equivalent or greater academic skills as a university graduate (ending with dentistry, medicine, pharmacology or veterinary) based on an individual qualification review conducted by this graduate school, and who will be 24 years of age as of March 31, 2020.

Applicants who would like to base their application on Application Qualification should contact the Admission Section in advance and then carry out the following procedures.

Documents to be submitted

	Application qualifications category					Documents to Be Submitted	
	1)	2)	3)	4)	5)		
1	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Application for the preliminary examination of the applicant's eligibility	Designated form
2	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Transcript	Issued by alma mater and written in Japanese or English
3	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Certificate of graduation	Issued by alma mater and written in Japanese or English
4						Recommendation letters	Issued by university president or dean of faculty
				<input type="radio"/>		Recommendation letters (prospective supervisor)	Prepared by prospective supervisor in desired department (only for students in School of Dental Medicine, Hokkaido University)
5					<input type="radio"/>	Research Resume	No designated format. Use A4 size paper. <ul style="list-style-type: none"> · Duration of research · Content of research · Names of research organizations · List of papers, research articles, and conference presentations
6					<input type="radio"/>	Record of achievements□	No designated format. Use A4 size paper. 1. Dissertation titles 2. Names of co-authors and collaborating presenters 3. Date of publication or presentation 4. Name of publisher, journal that carried paper, or conference where it was presented 5. Summary of no more than 200 Japanese characters Notes: 1. Include jointly authored treatises and writings 2. Supply reference numbers and provide descriptions for each dissertation
7					<input type="radio"/>	Summary of research conducted to date and Plans for research to be conducted in preferred field	No designated format. Use A4 size paper.

履 歴 書

curriculum vitae

氏 名 Full Name	(男・女) (M ・ F)	生年月日 Date of Birth	年 月 日 year month day
志望教室 Prospective Department	※事前に指導予定教員に相談すること。 Before applying, contact your prospective academic advisor in advance.		
区 分 Type of Study	在学等の履歴 Date of Study	標準修業 年 限 Official Required Years for Graduation	学 校 等 名 Name of School or Institution ※留学生は小学校から記載すること For International Students; please write down from elementary school
学 歴 School Education	年 月 ~ 年 月 From Year Month Year Month	年 Years	
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日 本 語 教 育 等 Japanese Language Study	年 月 ~ 年 月 From Year Month Year Month		
	年 月 ~ 年 月 From Year Month Year Month		
職 歴 等 Employment Record	年 月 ~ 年 月 From Year Month Year Month		
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	年 月 ~ 年 月 From Year Month Year Month		
研 究 歴 Research history	年 月 ~ 年 月 From Year Month Year Month		
	年 月 ~ 年 月 From Year Month Year Month		
	年 月 ~ 年 月 From Year Month Year Month		
資 格 Certificates	年 月 Year Month		
	年 月 Year Month		
賞 罰 Awards/crimi nal record	年 月 Year Month		
	年 月 Year Month		

上記のとおり相違ありません。
There is no difference as shown in the above-mentioned.

年 月 日
Year Month Day

氏名 (自署)

Signature