**Post-graduate Program for**

**Agribusiness Global Human-resources Development（PPAGHD）**

**in Graduate School of Agriculture, Saga University**

**ＡＰＰＬＩＣＡＴＩＯＮ ＦＯＲＭ**

INSTRUCTIONS (記入上の注意)

1. Application should be typewritten or written in Roman block capitals．

(記入は楷書又は大文字のローマ字体を用いること。)

2. Numbers should be written in Arabic figures．

(数字は算用数字を用いること。)

3. Year should be written in the Anno Domini system．

(年号はすべて西暦とすること。)

4. Proper nouns should be written in full and not be abbreviated．

(固有名詞はすべて正式な名称とし、一切省略しないこと。)

5. Write your name and the address within the box below for notifying the result of the selection. This box will be used for the addressing stickers.

(合格通知書等を送付するので氏名と住所を下記欄に記入のこと｡

この欄は住所ラベルとして使用する。）

Name ：

Present ：

address

＊受験番号

第 号

**Form Ａ**

**Post-graduate Program for**

**Agribusiness Global Human-resources Development**

**in Graduate School of Agriculture, Saga University**

(MASTER COURSE)

2025年度佐賀大学大学院農学研究科アグリビジネス国際人材育成プログラム(修士課程)入学志願票

Paste a passport sized photograph or digital image taken within the past 6 months. Write your name and nationality in block letters on the back of the photo.

（4.5㎝×3.5㎝ photo）

（写真（4.5㎝×3.5cm））

Research Field

Research Field：

Laboratory：

Name of the desired supervisor（指導を希望する主指導教員名をかならず記入すること。）

１. Name in full, in native language (姓名(自国語))

， ，

(Family name) (First name) (Middle name) (Sex)

□Male (男)

In Roman block capitals (ﾛｰﾏ字) □Female (女)

， ，

(Family name) (First name) (Middle name) (Marital Status)

□Single (未婚)

1. Nationality □Married (既婚)

(国籍)

1. Date of birth (生年月日)　Year ,Month　 　,Day　 　,Age (as of March 31, 2025)

(年) (月) (日) (年齢)

1. Present status with the name of the university attended, or employer

(現職(在学大学名又は勤務先名まで記入すること。))

1. Present address and telephone number, facsimile number, e-mail address

(現住所及び電話，ファックス番号，E-mailアドレス)

現住所(Present address) :

電話番号/FAX番号(Telephone/facsimile number) :

E-mail address :

1. Permanent address (本籍):
2. Field of specialization studied in the past (Be as detailed and specific as possible.)

（過去に専攻した専門分野(できるだけ具体的に詳細に書くこと。)

8.　Educational background (学歴)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Name and Address of School  (学校名及び所在地) | Year and Month of Entrance and Completion  （入学及び卒業年月） | Amount of time spent at the school attended  （修学年数） | Diploma or Degree awarded,Major subject  （学位・資格，専攻科目）  When taking leave of absence,the period and reason.  （休学した場合はその期間・理由） |
| Elementary Education  (初等教育)  Elementary School  (小学校) | Name  (学校名)  Location  (所在地) | From  (入学)  To  (卒業) | years  (年)  and  　　months  (月) |  |
| Secondary Education (中等教育)  Lower Secondary School  （中学） | Name  (学校名)  Location  (所在地) | From  (入学)  To  (卒業) | years  (年)  and  　　months  (月) |  |
| Upper Secondary School  （高校） | Name  (学校名)  Location  (所在地) | From  (入学)  To  (卒業) | years  (年)  and  　　months  (月) |  |
| Higher Education  (高等教育)  Undergraduate Level  (大学) | Name  (学校名)  Location  (所在地) | From  (入学)  To  (卒業) | years  (年)  and  　　months  (月) |  |
| Graduate Level  (大学院) | Name  (学校名)  Location  (所在地) | From  (入学)  To  (卒業) | years  (年)  and  　　months  (月) |  |
| Total years of schooling mentioned above  (以上を通算した全学校教育修学年数)  as of March 31, 2025  （2025年３月31日現在） | | years(年) |  | |

* If the blank spaces above are not sufficient for the information required, please attach a separate sheet ((注)上欄に書ききれない場合には，適当な別紙に記入して添付すること｡)

1. State the titles or subjects of books or papers (including graduation thesis authored by the applicant), if any, with the name and address of publisher and the date of publication.

(著書，論文(卒業論文を含む。)があればその題名，出版社名，出版年月日，出版場所を記すこと｡)

＊Accompany this form with a summary of the papers mentioned above.((注)論文の概要を添付のこと)

1. Employment Record: Begin with the most recent employment，if applicable. (職歴)

|  |  |  |  |
| --- | --- | --- | --- |
| Name and address of organization  (勤務先及び所在地) | Period of employment (勤務期間) | Position  (役職名) | Type of work  (職務内容) |
|  | From  To |  |  |
|  | From  To |  |  |

11. Japanese language background, if any (日本語の学習歴)

1. Name and address of institution (学習機関及びその住所)
2. Period of study: from to ，

(学習期間) Year (年) Month (月) Year (年)Month (月) Years(年間)

1. Name of teacher (教師名)
2. Japanese language proficiency: Evaluate your level and insert an X where appropriate in the following blank space. （日本語能力を自己評価のうえ，該当欄に×印を記入すること｡）

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent(優) | Good(良) | Fair(可) | Poor(不可) |
| Reading (読む能力) |  |  |  |  |
| Writing (書く能力) |  |  |  |  |
| Speaking (話す能力) |  |  |  |  |

12. Foreign language proficiency: Evaluate your level and insert an X where appropriate in the following blank space. (外国語能力を自己評価のうえ，該当欄に×印を記入すること｡)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent(優) | Good(良) | Fair(可) | Poor(不可) |
| English(英語) |  |  |  |  |
| French(仏語) |  |  |  |  |
| German(独語) |  |  |  |  |
| Spanish(西語) |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

13. Family background (家族状況)

|  |  |  |  |
| --- | --- | --- | --- |
| Name(氏名) | Relationship  (続柄) | Age  (年齢) | Occupation  (職業) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. Accompanying Dependents (Provide the following information if you plan to bring any family members to Saga, Japan.) 同伴家族欄（佐賀に来る場合，同伴予定の家族がいる場合に記入すること。）　　　　　　　　　　\* He/She is advised to take into consideration various difficulties and the great expense that will be involved in finding living quarters. Therefore, those who wish to be accompanied by their families are advised to come alone first and let their dependents come after suitable accommodation has been found.

（注）家族用の宿舎をみつけることは相当困難であり賃貸料も非常に割高になるのであらかじめ承知されたい。このため，留学生はまず単身で佐賀に来て，適当な宿舎をみつけた後，家族を呼び寄せること。

|  |  |  |
| --- | --- | --- |
| Name  （氏　名） | Relationship  （続　柄） | Age  （年　齢） |
|  |  |  |
|  |  |  |
|  |  |  |

1. Person to be notified in applicant’s home country in case of emergency: (緊急の際の母国の連絡先)
2. Name in full(氏名)：
3. Address : with telephone number, facsimile number, e-mail address:(住所:電話番号,ファックス番号及びe-mailアドレスを記入のこと｡)

現住所(present address) :

電話番号/FAX番号(Telephone/facsimile number) :

E-mail address :

1. Occupation（職業）:
2. Relationship（本人との関係）:

16. Immigration Records to Japan. (日本への渡航記録)

|  |  |
| --- | --- |
| Date　(日付) | Purpose　(渡航目的) |
| From  To |  |
| From  To |  |

Date of application(申請年月日):

Applicant’s signature(申請者署名):

Applicant’s name (in Roman

block capitals)(申請者氏名):

＊ 受験番号

第 号

Form B

**Post-graduate Program for**

**Agribusiness Global Human-resources Development（PPAGHD）**

**in Graduate School of Agriculture, Saga University(MASTER COURSE)**

**Admission Ticket for The Examination**

2025年度佐賀大学大学院農学研究科アグリビジネス国際人材育成プログラム（修士課程）

受験票

Photo

4.5cm×3.5cm

Taken within 6

months.

1. Research field（志望分野）

Research Field

Laboratory

1. Sex □ Male （男） □ Female （女）
2. Name in full; in native language （氏名（自国語））

， ，

(Family name) (First name) (Middle name)

In Roman block capitals （ローマ字）

， ，

(Family name) (First name) (Middle name)

**Form C（在日）**

＊ 受験番号

第 号

**推薦書**

**letter of RECOMMENDATION**

**佐賀大学長 様**

**To: President of Saga University**

被推薦者

Recommendee

氏名

Full Name:

生年月日

Date of Birth:

国籍

Nationality:

日付

Date:

(month) (date) (year)

推薦者

Recommender

署名

Signature:

氏名

Print Name:

役職

Title and Institution

(or Company):

現住所

Present Address:

**Form D（在日）**

＊ 受験番号

第 号

**証明書**

**letter of REFERENCE**

**佐賀大学農学研究科長 様**

**To: Dean of the Graduate School of**

**Agriculture, Saga University**

被証明者

Referenced person

氏名

Full Name:

生年月日

Date of Birth:

国籍

Nationality:

日付

Date:

(month) (date) (year)

証明者

Reference person

署名

Signature:

氏名

Print Name:

役職

Title and Institution

(or Company):

現住所

Present Address:

Eメールアドレス

E-mail Address: