2017 JAUW INTERNATIONAL FELLOWSHIP

 APPLICATION FORM Part 1 (Personal Data)

**MUST BE RECEIVED by:** March 31, 2017

All entries must be single spaced, and typed in English. The format must be kept as specified in this application form.

PHOTO

1 **Name in full & Age, Date of Birth**

 **­­­­­­­­­­­­­­­­­­­­­­ ­­­­­­­­­­­­­­­­­­­­­­ ­­­­­­­­­­­­­­­­­­­­­­**

(surname/family name) (given name, inclusive of middle name and/or others)

  ­­­­­­­­­­­­­­­­­­­­­

age /as of Mar.31, 2017 year of birth month day

1. **Postal address and related information**:

|  |  |
| --- | --- |
| 2-1 e-mail address |  |
| 2-2 Nationality |  | 2-3 Permanentaddress | (country) (area/city)  |
| 2-4 Postal address |  |
| 2-5 Telephone number  | (country code) (area/city code) (local code) (your number) | 2-6 FAX | (country code) (area/city code) (local code) (your number) |

**3** If you have a **Membership** of a National Federation and /or Association(NFA, [click here to see](http://www.ifuw.org/where-we-work/) info of this ) of the Graduate Women International (GWI, [click here to see](http://www.ifuw.org/) info of this), or an independent member of GWI ([click here to see](http://www.ifuw.org/who-we-are/our-membership/independent-members/) info of this),

enter below the name of your Federation or Association.

|  |
| --- |
| the name of your Federation and/or Association   |

**4 Academic qualification**

|  |  |
| --- | --- |
| Bachelor’s degree　 | field 　　 university 　　　　　　 country year   |
| Master’s degree　 | field university country year 　 |
| Doctor’s degree  | field university country year   |
| PresentlyDoctoral student | field university country from when |

**5. Foreign language proficiency leve**l (Please mark A in the table below for advanced, I for intermediate, and E for elementary):

|  |  |  |  |
| --- | --- | --- | --- |
|  | 　Speaking  | 　Reading | Writing |
| English  | A I E　 | A I E　　 | A I E　 |
| Japanese | A I E　 | A I E　 | A I E　 |

**6.**  **Letters of Recommendation** Please list the Names and Capacities of three persons who are well acquainted with your work, indicating how long each of them has known you. If you are presently at graduate school, please include at least a professor who has worked closely with you. If presently employed, please include one from your current employer or supervisor well acquainted with your work experience. If you are a member of an NFA of GWI or GWI’s independent member, you may include among the three the President of your Federation or Association as a recommender.

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Full Name  | Status | How long |
|  |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |

**7 Work experiences /activities** List up to three work experiences /activities in reverse chronological order, beginning with the most recent

　and ending with the oldest. Include dates of work, name of employing body, title/nature of the position, and brief description of the work.

|  |  |  |  |
| --- | --- | --- | --- |
| Dates(to/from) | Place of Work  | Position/Title | Brief description of Work |
| to the present from\_\_\_\_\_\_\_\_ |  |  |  |
| to\_\_\_\_\_\_\_\_\_\_from\_\_\_\_\_\_\_\_ |  |  |  |
| to\_\_\_\_\_\_\_\_\_\_from\_\_\_\_\_\_\_\_ |  |  |  |

**8**  Have you ever been in Japan **for more than 3 months t**o do study/research before applying this time?

|  |  |  |
| --- | --- | --- |
| How many times? | ( ) times | Your last stay from :( year )(month ) to ( year )(month ) |

**9. Proposed dates of arrival in and departure from Japan:**

Arrival: 2017 Departure; 2018

 year month day year month day

**10. Other awards/financial aids** you are applying for the same period of your stay in Japan:

|  |  |
| --- | --- |
| 　Name of Fund | 　Date of Result Announcement |
| 　 | 　 |
| 　 | 　 |

**11. Your Budget estimation;** Please enter below with the support of your would-be host institution

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| round-trip ticket | living accommodation/month | meal/month | tuition if charged/month | entrance fee if charged  | study related expenses |  misc.expenses |
| JP￥ | Jp￥ | JP￥ | JP￥ | JP￥ | JP￥ | JP￥ |

**12. Signature and Date:** By submitting this form you certify that all the information provided on this form is complete and correct to the best of your knowledge

 Signature (full name):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: