



Junior Year Overseas at YOKOHAMA National University Program for Academic Exchange

JOY

Application Packet for Admission in April and October 2016

Applicants to the Junior Year Overseas at Yokohama National University (JOY) Program should submit the following. We will not be able to accept incomplete or late applications. Please note that only students who will be enrolled at, and who will return to complete studies at a university that has signed a student exchange agreement with Yokohama National University are eligible to apply.

The application is comprised of the following documents:

A. Included in this packet

- ☐ Junior Year Overseas at Yokohama National University Program for Academic Exchange (JOY) Application Form
- ☐ Confidential Reference Form
- ☐ Japanese Language Background Sheet
- ☐ Personal Data Sheet
- ☐ Financial Information Sheet
- ☐ Statement of Purpose
- ☐ Contract
- ☐ Health Certificate (Please submit the Health Certificate after notification of admission. Your health exam must be within six months of your arrival date.)

B. Not included in this packet

- ☐ Certificate of Enrollment (or other document from your university certifying your student status. Should contain following information: Your name, University name, Date of admission, Planned date of graduation (This needs to be after the date you leave Japan after completion of the JOY program.)
- ☐ A copy of language proficiency certificate. Either (1) or (2) is required. (1) is waived if the applicant has enrolled in a university where the primary language of education is English. (1) can also be substituted with a letter signed by a faculty member testifying that your English ability is close to the required level.
 - (1) TOEFL iBT 80 /IELTS 6.0 or higher
 - (2) Japanese Language Proficiency Test score N2 level or higher
- ☐ Statement of purpose and project proposal
- ☐ A current and official academic transcript
- ☐ Copy of passport (Please send as soon as possible. Your passport must have at least three months validity beyond the requested period of stay in Japan.)
- ☐ Bank Statement (In English)
- ☐ Four identical Photos (3.5x4.5cm) to be submitted after you receive admission notification. Details will be explained in the acceptance email (usually mid-January for spring semester and late-May for fall semester).

The application deadline is **December 10, 2015** for Spring Semester beginning in April 2016 and **April 20, 2016** for Fall Semester beginning in October 2016. Complete applications should be addressed to:

Short-term Exchange Program Office International Student Center Yokohama National University 79-1 Tokiwadai, Hodogaya-ku Yokohama 240-8501 KANAGAWA, Japan Email: kokusai.ryugaku@ynu.ac.jp		〒240-8501 横浜市保土ヶ谷区常盤台79-1 横浜国立大学・国際教育センター 短期留学担当 Email: kokusai.ryugaku@ynu.ac.jp
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Application Form

※Please TYPE (using Adobe Reader, etc.) or PRINT all information in Roman letters and Arabic numerals.

Personal Details 個人情報詳細

1. Family Name(s) in English as shown in your passport _____

2. Given Name(s) in English as shown in your passport _____

3. If you have Chinese characters for your complete names, or know the *katakana*, please write below.

4. Date of birth: (Year) _____ 年/(Month) _____ 月/(Day) _____ 日

6. Sex: ☐ Male
☐ Female

7. Marital status: ☐ Single
☐ Married

8. Nationality (the country issuing your passport): _____

9. Home university: _____

10. Major field: _____

11. Year of study: Undergraduate 1st ☐ 2nd ☐ 3rd ☐ 4th ☐
Postgraduate 1st ☐ 2nd ☐

*Please note that the JOY program is an undergraduate program.

12. Planned period of enrollment at Yokohama National University: Check one. Please note that it will not be possible to change your period of enrollment after the application deadline.

- ☐ Spring Semester only (April to August)
☐ Spring and Fall semesters (April to February)
☐ Fall Semester only (October to February)
☐ Fall and Spring semesters (October to August)

Contact Information 連絡先

13. First Contact E-mail address: _____ @ _____

14. Second Contact E-mail address: _____ @ _____

Please print clearly as we will be sending important notification emails to your address. As we have had trouble with blocked emails, please avoid using Hotmail accounts. We plan to send acceptance notices by early June for fall semester and by mid January for spring semester.

15. From your first contact E-mail address noted in 13., send an email to kokusai.ryugaku@ynu.ac.jp with "JOY application" in the subject line. In the message, please write your full name and home university.

Email sent on: _____ (mm/dd/yr)

16. Write your postal contact information in English spelling. Please notify us of changes.

No. and Name of Street: _____ Suburb/Ward: _____

Town/City: _____ Postcode: _____

State/Prefecture: _____ Country: _____

Telephone No.: (+) - - Mobile Phone No.: (+) - -

Country Code

Country Code

Facsimile No.: (+) - -

Country Code

17. Your current residential address if different from your contact information

No. and Name of Street: _____ Suburb/Ward: _____

Town/City: _____ Postcode: _____

State/Prefecture: _____ Country: _____

Telephone No.: (+) - -

Country Code

18. Language Proficiency 語学能力

Students need to be proficient in English or Japanese to be eligible for the JOY Program. For English language, TOEFL iBT 80 /IELTS 6.0 or higher is required. This score is waived if English is the primary language of education at your home university. It can also be substituted with a letter signed by a faculty member testifying that your English ability is close to the required level. For Japanese language, the Japanese Language Proficiency Test N2 Level or higher is required. The JLPT score may not be waived or substituted.

Name of Examination: ☐IELTS ☐TOEFL ☐MUET ☐CET ☐Other / ☐JLPT SCORE: _____

Full Name of Examination if different from tests mentioned above: _____

Level, Type of Module & Program if any: _____

Name of Authority: _____

Date of Examination: _____

Location of Examination: _____ City: _____

State/Prefecture: _____ Country: _____

N.B. You need to attach a copy of your certificate with your application.

JASSO Scholarship 日本学生支援機構奨学金

The JASSO (Japan Student Services Association) Scholarship is a competitive scholarship which consists of monthly stipends of 80,000 yen.

- Only students who are certain to attend the JOY program upon acceptance are eligible.
- Only students who will be enrolled at, and who will return to complete studies at their home university are eligible.
- Only students for whom it will be financially difficult to attend the JOY program without the JASSO scholarship are eligible.
- Although we will be able to place all students in dormitory rooms in most cases, in the case that there is a shortage of available dormitory rooms, there is a slight possibility that students receiving the JASSO scholarship will need to find accommodation on their own outside of YNU dormitories.
- Students receiving another scholarship exceeding 80,000 yen per month will not be eligible to receive the JASSO scholarship.
- JASSO recipients who do not successfully complete the program or who do not return to their home university upon completion of the program may need to return their stipends and allowance.
- Students possessing Japanese nationality are not eligible for this scholarship.

19. If you will be receiving financial support during your stay in Japan, please note the source of support and amount:

Source: _____ Amount per month: _____

20. Please check here ☐ if you would like to apply for the JASSO scholarship.

*P.11 needs to be completed and signed by your study abroad coordinator for your application to be processed.

21. Please check A or B below:

A. ☐ I would like to attend the JOY Program regardless of whether or not I receive the JASSO Scholarship.

B. ☐ Without the JASSO Scholarship, I will not be able to attend the JOY Program.

*Please note that if you check B. and your application for the JASSO Scholarship is not accepted, your JOY application will be cancelled automatically.

**Junior Year Overseas at Yokohama National University
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Confidential Reference Form

To be filled out by a faculty member of the applicant's major at the home institution with sufficient knowledge of the applicant.

Name of Applicant: _____

1. How long have you known the applicant ? In what capacity ?

2. Please rate the applicant in comparison with other students at the same level in the following areas, using the ratings 4, 3, 2, 1 and NB. (4=outstanding 3=good 2=average 1=below average NB=no basis for judgment)
a) Academic ability _____ b) Maturity _____
c) Motivation & Diligence _____ d) Ability to cooperate with others _____
3. Please give your candid opinion regarding the applicant's academic/professional performance, character and adaptability.

4. Please check the appropriate terms.

1) In terms of academic ability, I recommend this candidate:

☐strongly ☐fairly strongly ☐with reservations ☐not at all

2) In terms of character, I recommend this candidate:

☐strongly ☐fairly strongly ☐with reservations ☐not at all

Signature: _____ Date: _____

Name (please print) _____ Title or Position: _____

Address: _____

Email address: _____@_____

Telephone No.: (+_____) _____ - _____ - _____ Facsimile No.: (+_____) _____ - _____ - _____
Country Code Country Code

After completing this form, please seal it in an envelope, place your signature over the seal, and return it to the applicant. Unsealed recommendations will be considered invalid.

**Junior Year Overseas at Yokohama National University
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Japanese Language Background Sheet

Name: _____

Home University: _____

1. Do you intend to take Japanese language courses at Yokohama National University? ☐YES ☐NO
 2. Have you studied Japanese language at your home university? ☐YES ☐NO
 3. If you answered NO to question number 2, have you studied Japanese language elsewhere? ☐YES ☐NO
 4. If you answered YES to question number 3, please elaborate: _____
 5. If you have taken the JLPT or other Japanese language proficiency test, please specify your level and attach the certificate: _____
- If you answered YES to questions number 1 and 2, please have your Japanese language professor complete the following information.

To the Japanese professor completing this form: In order for us to have an idea of your student's Japanese language ability, please give as complete information as possible below.

Background information

I. Japanese language experience (Most recent course first)

- 1) Course title: _____ Final course grade _____
Number of classes per a week _____ (Class period: _____ min .)
Text books : _____
Lessons covered in class (Lesson _____ to Lesson _____)
- 2) Course title: _____ Final course grade _____
Number of classes per a week _____ (Class period: _____ min.)
Text books : _____
Lessons covered in class (Lesson _____ to Lesson _____)

II. Additional information on the most recent course

Please indicate the student's percentile ranking by circling one of the following:

- ☐Top 2% ☐Top 5% ☐Top 10% ☐Top 40% ☐Bottom 50% ☐Bottom 15%

Please outline the number and length of written assignment, examinations, etc..

Please comment on the student's class participation, strength, weakness, personality, attitude, etc.:

Please specify, if any, assignments you gave to your student while participating in the exchange program.

If available, please attach relevant documents on your Japanese language program.

Name: _____

Title: _____

Institution: _____

E-mail address: _____@_____ Date: _____

**Junior Year Overseas at Yokohama National University
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Personal Data Sheet

1. Name: _____
Family Name Given name(s)
2. Nationality: _____ 3. Sex: ☐ Male ☐ Female
4. Date of Birth: _____
Year Month Date
5. Place of Birth: a) Country _____ b) State _____ c) City/Town _____
6. Marital Status: ☐ Married ☐ Single
7. Passport Information: a. Number _____
b. Date of Issue _____
Year Month Date
c. Date of Expiration _____
Year Month Date
d. Issuing Authority _____

Your passport must have at least three months validity beyond the requested period of stay in Japan.

8. Intended Length of Stay in Japan: _____
9. Accompanying persons, if any: _____
10. Nearest Japanese Embassy/Consulate: _____
11. How many times have you previously entered Japan? _____ times. For your latest past entry into Japan, please write the date of entry and departure: (yyyy/mm/dd) _____ entry and (yyyy/mm/dd) _____ departure.
12. Criminal record (if any): _____
13. Past deportations (if any): _____
14. Family in Japan

Relationship	Name	Date of Birth	Nationality	Plan to reside with?	Occupation	Status of Residence(Period of stay)

15. Total period of education <Number of years in school from elementary school to present>:
_____ years
16. Expected date of graduation from university (yyyy/mm/dd) _____
17. List any academic honors, awards, or scholarships you have received
18. Work experience (if any)

19. If you have been treated for any physical or mental disorders, please detail below.

20. If you have any allergies to foods, plants, or animals, please detail below.

21. If you have any adverse reactions to medication, please detail below.

22. If you are taking any prescription medication now, please detail below.

23. Planned port of entry: ☐Narita ☐Haneda

**Junior Year Overseas at Yokohama National University
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Financial Information Sheet

To be filled out by the individual providing financial support to student while in Japan.

Please attach a bank statement in English that shows current balance. The bank statement must show sufficient funds for completion of the program. Minimum living expenses in Yokohama are approximately 80,000 yen per month.

If you are on a scholarship or are receiving a student loan, please attach a certificate which shows the amount of financial support to be received.

1. Name of person providing financial support: _____
2. Relationship to student: _____
3. Address: _____
4. Phone Number: _____
5. Employment (Institution name): _____
6. Annual Income: _____ Yen
7. Planned monthly remittance to student (if 1. is other than self) : _____ Yen
8. Total amount of funds available for duration of study (7. x number of months in Japan): _____ Yen

Signature: _____

Date: _____

Statement of Purpose and Project Proposal

Your statement of purpose and project proposal will be used for determining acceptance into the program and the JASSO scholarship.

1. Explain your reasons for applying to the JOY program and what you wish to accomplish academically and otherwise during your stay in Yokohama. (approximately one page typed)
2. JOY students will be required to undertake a research project each semester as part of their academic program. This entails completing a research paper on a topic that relates to “Japan,” broadly defined, and which includes an international (interactive or comparative) perspective. Write a project proposal which includes a tentative title, possible sources and approaches, and why the topic is of interest to you. (approximately one page typed)

**Junior Year Overseas at Yokohama National University
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Contract

I, _____, upon being admitted to the Junior Year Overseas at Yokohama National University Program for Academic Exchange hereby agree to obey the laws of Japan and the regulations laid down by the Japanese government concerning the conduct of students coming from abroad.

I am fully aware that a violation of these laws and regulations may result in my expulsion from the University, arrest, and deportation from the country. I do not hold the University responsible for my personal conduct nor for my personal debts nor for fines imposed on me for violations of laws and regulations.

I am also fully aware that unsatisfactory academic performance (JOY students are required to complete a minimum of 12 credits each semester) or a violation of rules and regulations of Yokohama National University may result in my expulsion from the University and deportation from the country.

If assigned to a dormitory room, I will accept to live in my assigned dormitory room.

I agree to abide by university regulations in purchasing the Japanese government's National Health Insurance (approximate annual cost ¥14,000) after arrival.

As an "ambassador" of my home university and country, I will take a positive stance toward participating in international exchange activities organized by the program.

If I receive the JASSO scholarship, I will participate in surveys after completion of the program upon request.

Applicant's signature: _____ Date: _____

To Coordinators of Applicants Applying for the JASSO Scholarship

Your student has applied for the JASSO scholarship.

In screening applicants, JASSO uses a 5 point scale to assess their academic performance. If your university has a grading system other than the A-F 5 point scale, please fill in which of your grades roughly correspond:

A (highest):

B:

C:

D:

F (failure):

If the applicant receives the JASSO scholarship, we will be mailing you a survey about the credits the student was able to transfer after completion of the program. Please return the data to us when it becomes available.

Coordinator name and signature: _____

Coordinator email address: _____

Date: _____

Junior Year Overseas at Yokohama National University
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Health Certificate

To be filled out by a medical doctor.

氏名: _____ 国籍: _____
Name: _____ Nationality: _____
姓(Family Name)・名(Given Name)・(Middle Name)

生年月日: _____ 年齢: _____ 性別: 男 女
Date of Birth: _____ Age: _____ Sex: ☐ Male ☐ Female
年(Year)・月(Month)・日(Day)

現住所: _____ 電話: _____
Present Address: _____ Phone: _____

身長: _____ 体重: _____
Height: _____ cm Weight: _____ kg

視力 ☐ 裸眼(Without Glasses) ☐ 矯正(With Glasses)
Vision 右: _____ 左: _____
Right: _____ Left: _____

聴力 右: 正常 低下 / 高度 中等度 軽度
Hearing Right: ☐ Normal ☐ Impaired / ☐ Serious ☐ Moderate ☐ Mild
左: 正常 低下 / 高度 中等度 軽度
Left: ☐ Normal ☐ Impaired / ☐ Serious ☐ Moderate ☐ Mild

胸部X線検査: _____ 撮影年月日: _____
Chest X-ray Examination: _____ Date of Examination: _____
(You do not need to send the X-ray photograph) 年(Year)・月(Month)・日(Day)
所見: _____
Findings: _____

既往歴: 無 有
Past Illness: ☐ No ☐ Yes: _____

現病歴: 無 有
Present Illness: ☐ No ☐ Yes: _____

記載年月日: _____ 所在地: _____
Date: _____ Address: _____

医療機関名: _____
Hospital/Clinic: _____

医師氏名: _____
Physician's Name: _____

署名/捺印: _____
Signature/Seal: _____