



Osaka School of International Public Policy
The University of Osaka
Application Package
for graduate applicant

(Use this as cover sheet for the package)

Date (Day/Month/Year): _____

Name of Applicant: _____

Home Institution: _____

This application should be sent as a complete package containing all of the following documents.

Checklist (Check the boxes provided)

- 1) ☐ A completed application form (**Form: Application**)
- 2) ☐ A nomination letter from the representative of the home institution, such as the Dean/Director or the Program Officer in charge of student exchange ※
Please state the expected graduation date of the applicant in the letter.
- 3) ☐ An original transcript of the applicant's record or a copy of the document with official certification from the institution ※
In a case where you do not have a graduate school transcript, please submit a transcript from your undergraduate school.
- 4) ☐ A study plan (**Form: Study Plan**)
- 5) ☐ A Financial Resources Confirmation Form (**Form: Financial Resources**)
- 6) ☐ A Bank Statement※

※If documents are not in English or Japanese, please submit a translation into one of those languages.

The application package should be sent to the following address through the office responsible for student exchange at the applicant's home institution.

*Educational Affairs Section, Osaka School of International Public Policy,
The University of Osaka
1-31 Machikaneyama, Toyonaka, Osaka 560-0043 Japan
Telephone Number: +81-6-6850-5612*

Application Deadline:

For Fall and Winter Terms that commences on October 1, 2025

May 30, 2025

For Spring and Summer Terms that commences on April 1, 2026

November 28, 2025

Note:

Applicants must understand the following points before submitting application.

- Enrollment period at OSIPP must be within the term of applicant's student status at their home institution.
- Either of the following student statuses should be chosen according to purpose of study at OSIPP.

Special Auditors:

This student status is for those who intend to take classes and earn credits at OSIPP.

Special Auditors are accepted on a term/semester basis and can register for OSIPP courses and International Exchange Subjects.

Special Auditors are required to take courses at least 10 hours per week during their stay at OSIPP, based on an Ordinance of the Ministry of Justice.

Special Research Students:

This student status is for those who intend to conduct research at OSIPP.

Special Research Students can receive research guidance but cannot acquire credits.

For this status, the preferred academic supervisors among OSIPP's faculty, a 1st and 2nd choice, must be specified in the Section 3 Study Period.

Information on OSIPP faculty and their research topics is available at the following website:

<https://www.osipp.osaka-u.ac.jp/en/osipp-faculty/>

Special Research Students are required to engage in research work at least 10 hours per week during their stay at OSIPP, based on an Ordinance of the Ministry of Justice.

In the course of carrying out the enrollment procedures, some tasks may be outsourced to external providers. In this case, a contract will be concluded with the external provider to ensure that personal information is handled appropriately, and all or part of the personal information submitted at the time of application will be provided to that provider.

Application

Note:

- Please type or print.
- Should be filled out in English.
- Numbers should be Arabic numerals.
- Years should be written according to the Western calendar.
- Proper nouns should be written in full, no abbreviations.

Paste your photograph (3×4cm), taken within the last 6 months, on the back of which your name is written in block letters.

Section 1: Personal Details

Name as in your passport

Family Name First Name Middle Name

Name in Chinese characters (if applicable)

Nationality

Sex

☐

Male

☐

Female

Date of Birth

Day Month Year

Present Mailing Address

Tel: Fax: E-mail:

Permanent Address

Tel: Fax: E-mail:

Person to be notified in case of emergency

Name : Tel: Contact Address: E-mail:

Home Institution

University: Faculty / School: Department: Major Field of your study:

Entrance: ☐ Master ☐ Doctor
Month Year

Grade:
(School Year)

Expected graduation / completion date at home institution

/ /
Day Month Year

Institution	Name and location of institution	Degrees earned	Entrance		Completion	
			Month	Year	Month	Year
University/ College	Major:					
University/ College	Major:					

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Language Self Evaluation (Check the appropriate box.)

	Native Language	Excellent	Good	Fair	Poor
Japanese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Others: Specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have a certificate of language competence, such as TOEFL, IELTS or JLPT (Japanese Language Proficiency Test), please specify the details below.

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Please attach a certified copy of the test score.

Section 3: Study Period

Study Period (Check the appropriate box and/or fill-in the blanks.)

Select one of the plans below, and indicate your study period.

Status	Study Period
<input type="checkbox"/> Special Auditor (Graduate Student)	From / / To / / Day Month Year Day Month Year
<input type="checkbox"/> Special Research Student (Graduate Student)	

※For details of each status, please see Note on the back side of the cover sheet.

Preferred Academic Supervisors

If you select Special Research Student, please specify your first and second choice of advisor among OSIPP faculty.

1st choice:

2nd choice:

Section 4: Accommodation

A limited number of rooms can be available at university dormitory.

- (1) Do you apply for a room at university dormitory? ☐ Yes ☐ No
(No additional documents are required.)

- (2) If we are not able to assign you to the University dormitory, you will have to find housing/accommodation with the help of the Support Office for International Students and Scholars, the University of Osaka. Are you willing to participate in the exchange program, even if your accommodation is not assigned to University Dormitory?
☐ Yes ☐ No

STUDY PLAN

(Please type or print.)

Name in full:

Major/ Minor field of study at your university:

Describe your study plan during your stay at the University of Osaka.

*If you select Special Auditor, please include the courses you wish to take (Course Code, Course Title, Instructor).

Special Auditors are required to take courses at least 10 hours per week, so basically you need 7 courses.

Financial Resources Confirmation Form

Name of Applicant: _____

Home Institution: _____

1. Information on Financial Resources: Your main source of income to be used during your stay in Japan

- | | | |
|--|-------|-----|
| <input type="checkbox"/> Yourself (own savings): | _____ | yen |
| <input type="checkbox"/> From financial supporter: | _____ | yen |
| <input type="checkbox"/> Scholarship: | _____ | yen |
| <input type="checkbox"/> Others: | _____ | yen |

2. Financial Supporter Information (If you checked "From financial supporter" in 1)

- | | | |
|--------------------------|-------|----------------------|
| a) Name: | _____ | |
| b) Address: | _____ | Telephone No.: _____ |
| c) Occupation: | _____ | Telephone No.: _____ |
| d) Annual income: | _____ | yen |
| e) Relationship with you | _____ | |

3. Source of scholarship funding (If you checked "Scholarship" in 1)

Organization _____

Date: _____

Signature: _____

Please submit an original bank statement for yourself or your financial supporter if either party is to be your main source of income during your study at the University of Osaka . The statement must:

- be issued within 3 months,
- be written in English or Japanese,
- specify the name of the account holder, and
- the balance exceeding the expected living costs in Japan (multiply ¥80,000 by intended month(s) of stay) in Japanese yen.