

2010 Graduate School of Medicine, Kansai Medical University  
Application for the screening of qualifications of  
the entrance examination

Date:

To the president of the Kansai Medical University

Applicant

First choice: Course ( ) Field( ) Subject( )

Second choice: Course ( ) Field( ) Subject( )

Name: seal

Date of birth:

Address:

Phone: ( ) -

I hereby apply for the screening of qualifications with the following document.

[Application qualification No. ]  
(Choose between 3) to 6) of application  
qualification 2 listed in the guidelines for  
applicants)

## Note

1. Resume (specified form) : Complete description of academic and job history from the graduation of high school
2. Certificates of academic background: Diploma, School transcript
3. Research activities of the applicant: Research activities after college (university) or at a laboratory (including achievement lists)
4. Certificate of employment (school) tenure: To be certified by the representative
5. Research achievements of the institute the applicant belongs: Annual reports of the institution, academic society report etc.
6. Reason for applying: Reason for applying to this graduate school and the summary of research results (2,000 to 5,000 characters)
7. Examination permission (specified form): The permission form created by the section chief
8. Certificate of employment: Certificate issued by the employer

\* In addition to the documents required in common (1 - 3), please submit the following documents (specified format for 1 and 7, optional form other than those).

4, 5 in the case of applying for the application qualification 3) and 6) - b

6 in the case of applying for the application qualification 4)

7, 8 in the case of applying for the application qualification 5)