Form 2

Date of Application: / /

**Kyoto University Short-Term International Student**

**APPLICATION FORM (To be completed by the Student)**

(“Kyoto – Africa IAfP Short-Term Online Course”)

**To: The Dean of Graduate School of Asian and African Area Studies at Kyoto University**

**Name of Student:** ,

(In native language/Kanji)(Last Name) (First Name) (Middle Name)

**Sex:** □Male □Female **Nationality:**

**Date of Birth:** / /

**Current Academic Status**

**(Name of your University/ Graduate School/Department or Division)**

 / /

I request to be allowed to admit to your university under the following conditions as

a Short-Term International Student

**Name of supervisor of KU:** Name: ,

 (Last Name) (First Name) (Middle Name)

Affiliation/Title:

## Study Plan at KU/Statement of purpose:

**Period of Exchange:** From: September /21 /2021 - Until: December / 20 /2021

**Name of supervisor:** Name: 　　 　　,

**in home institution** 　　　 　 (Last Name)　 (First Name) 　(Middle　Name)

Affiliation/Title: