(Appendix 1)

Proof of Payment of the Application Fee

In the case of payment method (B) Payments at Convenience Stores, please cut off the Certificate of Payment part of the Detailed Statement of the Handling of the Application Fee and Selection Fee, and submit it pasted onto the box below. In the case that you have paid using (C) Payments by Bank Transfer, please submit the Certificate of Remittance pasted onto the box below.

<Note> In the case that you have paid the application fee using (A) Payments by Credit Card, please print out and enclose the results of the Application Contents Inquiry at the e-shiharai site.

In the case that you have paid the application fee at a convenience store, please cut off the Certificate of Payment part of the Detailed Statement of the Handling of the Application Fee and Selection Fee, and submit it pasted onto this box.

In the case of a payment by bank transfer, please submit the Certificate of Remittance pasted here.

Desired graduate school Graduate School of Design

Academic supervisor of choice

Name

(Appendix 2)

**2025 Entrance Examination for Doctoral Program**

**Graduate School of Design Kyushu University**

**Application Form(April 2025 Admission・First Call)**

|  |  |  |  |
| --- | --- | --- | --- |
| Examinee number | \* | Nationality | Reference number |
| *Furigana* |  |  | \* |
| Name |  | Accepted/ rejected |
| Date of birth | \_\_\_\_\_\_\_ / \_\_\_ / \_\_\_\_ ( years old) | \* |
| Academic supervisor of choice (One faculty member only) |  | | |
| English Language Proficiency Test | Type | Score | Test date |
| □ TOEFL-iBT (Test at a test center) |  |  |
| Language of Choice for Interview (Select one only) | □ Japanese □ English | | |
| Academic background | (Month) (Year) High School graduation | | |
| Enrolled in  (Month) (Year) University (Undergraduate)  Department: | | |
| Graduated  (Month) (Year)  University (Undergraduate)  Department: | | |
| Enrolled in  (Month) (Year) University (Master course)  Department: | | |
| Graduated / Expected to graduate from  (Month) (Year)  University (Master course)  Department: | | |
| Work history | (Month) (Year) | | |
| (Month) (Year) | | |
| Current address | Zip code: ―  Telephone number:  E-mail: | | |
| Contact  (If the same as above, please state “Same as above.”) | Zip code: ―  Telephone number:  E-mail: | | |
| (Note) Please fill out this form after carefully reading the Notes regarding Filling Out this Form on the back. | | Student No.  (Only students enrolled in Kyushu University) | |

Notes regarding Filling Out this Form

1. Please do not fill out the fields marked with an asterisk (\*).
2. Changes in the academic supervisor of choice are not permitted after applying.
3. If applicants fill out false information, their enrollment may be revoked even after admission.
4. If your current address or contact changes during the period up until the enrollment procedures, please contact the Student Affairs Division, Administrative Office of Design promptly.

(Appendix 3)

2025 Entrance Examination for Doctoral Program

Graduate School of Design Kyushu University

(April 2025 Admission・First Call)

**Examination Slip**

|  |  |
| --- | --- |
| Examinee number | ※ |
| Academic supervisor of choice |  |
| Name |  |

|  |  |  |
| --- | --- | --- |
| Category  Date | Format | Test time |
| A date designated separately  (Individual notifications are sent out as soon as a decision is made) | Interview  (Oral examination) | A time designated separately  (Individual notifications are sent out as soon as a decision is made) |

|  |
| --- |
| Pasted photo  (4cm high × 3cm wide) |

[Note] Please be sure to present this slip on the day of the examination.

|  |
| --- |
|  |

2025 Entrance Examination for Doctoral Program

Graduate School of Design Kyushu University

(April 2025 Admission・First Call)

**Identification Slip**

|  |
| --- |
| Pasted photo  (4cm high × 3cm wide) |

|  |  |
| --- | --- |
| Examinee number | \* |
| Academic supervisor of choice |  |
| Name |  |

(Appendix 4)

Master’s Dissertation Abstract and Research Progress Report

[Department of Design]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Examinee number | \* | Academic supervisor of choice |  | Name |  |

\* Please use no more than 1,600 Japanese characters or 800 English words. (You may not write on the back.)

Note that recreating this form using word-processing software such as Microsoft Word, etc. is permitted.

Dissertation topic (or research topic):

(Note) This Form 4 consists of two pages, including the next page.

(First page of two pages)

(Appendix 4)

Master’s Dissertation Abstract and Research Progress Report

[Department of Design]

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Examinee number | \* | Academic supervisor of choice |  | Name |  |

(Second page of two pages)

(Appendix 5)

Research and Operational Achievements Report

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| [Department of Design] | Examinee number | \* | Academic supervisor of choice |  | Name |  |
| Name of academic dissertation, research report, patent, etc. | Date of publication or presentation | | Name of publisher, presenting journal, etc. or presenting academic society, etc. | | Co-author or co-presenter | Remarks |
|  |  | |  | |  |  |

[Note] Please attach separate prints or copies to academic dissertations, etc. Graduate School of Design, Kyushu University

Attach objective proof materials or a copy of any research and operational achievements listed in this form other than academic dissertations.

Materials related to research or achievements prepared in languages other than Japanese or English should be translated into Japanese or English, in

addition to the original or a copy of the original.

Note that recreating this form using word-processing software such as Microsoft Word, etc. is permitted.

(Appendix 6)

Research Proposal

Doctoral Program Department of Design

Academic supervisor of choice

Name

Please state the details of research that you would like to conduct in this department in no more than 1,600 Japanese characters or 800 English words

(You may not write on the back.)

Note that recreating this form using word-processing software such as Microsoft Word, etc. is permitted.

Research topic:

(Note) This Form 6 consists of two pages, including the next page.

(First page of two pages)

(Appendix 6)

Research Proposal

Doctoral Program Department of Design

Academic supervisor of choice

Name

(Second page of two pages)

(Appendix 7)

Mailing Labels

Each document will be delivered, so please fill out the form accurately to ensure that the mail reaches the applicant.

For notification of acceptance

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | Zip code:　　　　　－ |  |
|  | Address: |  |
|  |  |  |
|  |  |  |
|  | Recipient: Mr./Mrs./Ms. |  |
|  |  |  |
|  |  |  |

For sending documents for enrollment procedures

|  |  |  |
| --- | --- | --- |
|  |  |  |
|  | Zip code:　　　　　－ |  |
|  | Address: |  |
|  |  |  |
|  |  |  |
|  | Recipient: Mr./Mrs./Ms. |  |
|  |  |  |
|  |  |  |

(Appendix 8)

|  |  |
| --- | --- |
| Examinee number | \* |

2025 Entrance Examination for Doctoral Program, Graduate School of Design, Kyushu University

Entrance Examination Application Form for Preliminary Screening of Application Qualifications(April 2025 Admission・First Call)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Academic supervisor of choice |  | |  | |
| *Furigana*  Name |  | Current job | |  |
| Date of birth (age) | \_\_\_\_\_ / \_\_\_ / \_\_\_\_ ( years old) | Current address | |  |
| [Academic background] | | | | |
| Date | Details | | | |
|  |  | | | |
| [Work history] | | | | |
| Date | Details | | | |
|  |  | | | |
| [Activities, etc. in the academic world and society] | | | | |
| Date | Details | | | |
|  |  | | | |

[Note] If your academic papers/dissertation are stated under [Activities, etc. in the academic world and society], please attach the academic papers/dissertation.