

2021

Reception Date	※
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Application Form

For admission to Doctoral Program in Nursing Science, St. Luke's International University

To: Shigeko Horiuchi, President of St. Luke's International University

I apply for admission to the doctoral program in Nursing Science,
St. Luke's International University.

(Day) (Month) (Year)

Applicant's Name _____
(Signature)

<p>Photo</p> <p>Attach your photo taken within the last 3 months.</p> <p>4 (V)x 3 (H)cm</p>
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Name	(family name) (other names)	Male / Female	Birth Date	Day	Month	Year	Age ()
Nationality			Desired area of specialty (*)				
Home Address			Email address				
Present Address	〒					TEL	
Educational Background (after high school)	Month, Year (entry-completion)	Name of School			Location		Type and date of degree obtained
License (Circle all that apply)	1. Registered Nurse 2. Midwife 3. Others ()						

* Desired area of specialty: Write your desired area of specialty among the following: Nursing Psychology, Nursing Sociology, Nursing Information, Nursing Statistics, Principles of Nursing Science, Biobehavioral Nursing, Nursing Education, Nursing Administration, Genetics Nursing, Maternal Nursing & Midwifery, Child Health Nursing, Adult Nursing (Acute, Chronic), Geriatric Nursing, Women's Health, Mental Health and Psychiatric Nursing, Oncology Nursing/Palliative Care Nursing, Home Care Nursing, Community/Public Health Nursing, Global Health Nursing

(Note) 1. If the names appeared in other application documents are different from that of the application form, the certified proof of change of name should be submitted.
2. Your personal data will only be disclosed and used for this selection only.

Occupational Experience (Professional positions, most recent, last)	Month, Year~Month, Year	Description/Place		
Language (1=good 2=fair 3=poor)		Japanese	English	Others ()
	Reading			
	Writing			
	Listening			
	Speaking			
<p>Language Information: Please write down your TOEFL scores, and attach a copy of the score report. Scores: iBT _____ PBT _____ Test Date: (day) _____ (month) _____ (year) _____ Please write down your scores of Japanese as a Foreign Language of EJU, and attach a copy of the score report. Scores: _____ Test Date: (day) _____ (month) _____ (year) _____</p>				
<p>Title of master's thesis</p> <p style="text-align: right;">Date approved: (day) (month) (year)</p>				
<p>Description of previous research (including master's thesis)</p>				

Statement of purpose and research direction for doctoral study and thereafter (If you need additional space, please use a separate sheet)

Social Activities	Month, Year~Month, Year	
Living Costs	How do you intend to fund your study and living costs? Choose more than one if applicable. <input type="checkbox"/> Self-funded <input type="checkbox"/> Sponsored by family/government/institution/employer <input type="checkbox"/> Scholarship amount per month() <input type="checkbox"/> Bank loan <input type="checkbox"/> Others ()	