**KAIST – Tokyo Tech.**

**Double Degree Program**

(Use this sheet as the cover sheet for your application packet)

Name of Applicant:

　　　　　　　　　　　　　　(Family　(last) Name) (First (given) Name) (Middle Name)

Home University:

Application materials should be sent in one packet containing

**all of the following**:

|  |  |  |
| --- | --- | --- |
|  | **Items** | **Check** |
| 1 | KAIST/Tokyo Tech. Double Degree Program Application  (Refer to the attached form) |  |
| 2 | KAIST/ Tokyo Tech. Double Degree Program Study Plan  (Refer to the attached form)  (more than 1page in English)  - Duration of study in each institute, date of proposal exam,  research description, plan of classes to attend |  |
| 3 | Official Transcript of Academic Record (B.S and M.S)  - Please include the summary of the credit and accomplished year |  |
| 4 | Language proficiency  - TOEIC, TOEFL or IELTS |  |
| 5 | Copy of passport |  |

**KAIST/** **Tokyo Tech.** **Double Degree Program Application**

1. Personal Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name  (in English) |  | | Dept./Division |  |
| Degree  Program | MS | | Date of Admission |  |
| E-mail  Address |  | | Mobile Phone/ Home Phone |  |
| Home Address | |  | | |

1. Description of Application

|  |  |  |  |
| --- | --- | --- | --- |
| Total acquired  credits at Tokyo Tech. |  | GPA | / |
| Language  Proficiency | Evidence | Score/GPA | Date(Month/Year) |
| TOEFL(ibt) |  |  |
| Other: |  |  |
| For the Semester  Beginning | □ Fall 20\_\_\_\_ □ Spring 20\_\_\_\_ | | |
| Co-advisors | Co-advisor(KAIST) | (sign.) | |
| Co-advisor(Tokyo Tech.) |  | |
| Planned duration of study  (subject to change according to the study plan) | KAIST | from to | |
| Tokyo Tech. | from to | |
| Address & Phone No. of Home Institution |  | | |

I hereby ask for permission for the application to the aforementioned double degree program for M.S.

Date: (day/month/year)

【Approval】

|  |  |  |  |
| --- | --- | --- | --- |
| Coordinator of KAIST- Tokyo Tech.  Dual degree program | Committee for  Academic  Affairs | Department  Head | Applicant: (Signature)  Name |
|  |  |  | Advisor : (Signature)  at Tokyo Tech. |

**Study Plan**

|  |  |  |  |
| --- | --- | --- | --- |
| ① Department |  | ② Name |  |
| ③ KAIST advisor you hope |  | ④ Period of stay |  |
|  | | | |
|  | | | |

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Student: (signature)

Advisor: (signature)