2026 - 2027 Exchange Program Application

（Special Undergraduate Student / Special Graduate Student/ Special Research Student/Special Short-term Training Student）

The School of Law and the Graduate School of Law, Nagoya University

名古屋大学　法学部・大学院法学研究科　交換留学プログラムへの応募について

（特別聴講学生・大学院特別聴講学生・特別研究学生・特別短期研修学生）

To the Overseas Partner University applicant:

Thank you for your interest in the exchange program. We are providing information on the application procedure for those who are wishing to apply to the Graduate School of Law or School of Law as an exchange student.

Documents required for Application/ 出願書類

- Application Form (incl. Study Plan) /入学志願書（研究計画書を含む）［所定用紙］
- Personal Data Sheet/ 私費外国人留学生の受入れに係る調書［所定用紙］
- Language Proficiency Form & Supporting Documents (e.g., TOEFL, TOEIC, IELTS, and/or Japanese Language Proficiency Test <JLPT> score sheets) / 言語能力証明書[所定用紙]
- Official Certificate of Enrolment as a Student / 在籍証明書［所定用紙］
- Confidential Reference Form *(to be written by a faculty member in an academic field related to the applicant's 'major')* / 在籍大学の指導教員からの評価表・推薦状［所定用紙］
- Forms for Financial Resources / 資金計画書[所定用紙]
- Health Certificate / 健康診断書[所定用紙]
- Official Transcript of Academic Records (*to be issued by the institution presently being attended*) / 成績証明書
NB. Graduate students should submit academic records for both undergraduate and graduate studies
- Copy of the information page of the student's passport, where available/ パスポートのコピー
- Two identical photographs (4 cm x 3 cm) signed on the reverse side (one of 4 cm x 3 cm photograph should be attached to the Application Form)/ 写真 4cm x 3cm 2枚（裏側に署名をし、4cmx3cmの写真1枚は願書に添付すること。）
- Official letter from the rector of the dean of the university currently enrolled to the Dean of our School, which request for supervising of the applicant under the set term. / 在籍大学の研究科長から法学研究科長への研究指導委託状

Application Deadlines/ 出願締切日:
Completed application materials must reach the Student Affairs Section of the administrative office by the following dates:

-Admission for April 2026 entry: December 19, 2025
-Admission for October 2026 entry: May 22, 2026

Forwarding Address/ 願書送付先:
Student Affairs Section of the administrative office, The School of Law and the Graduate School of Law, Nagoya University
24-5(700) , Furo-Cho, Chikusa-Ku, 464-8601 JAPAN

Enquiries/ 問合せ先**:**
E-mail: law-kyomu@t.mail.nagoya-u.ac.jp
Website: https://www.law.nagoya-u.ac.jp/ (Japanese) or https://gsl.law.nagoya-u.ac.jp/ (English)

Payment of entrance and tuition fee / 授業料等学生納入金

In case that the partner university sends an exchange student under the tuition fee waiver agreement with Nagoya University, he or she is exempted from tuition fees.

授業料免除合意に関する協定大学からの交換学生は、授業料などの納入が免除されます。

Note: Please consult with the international division of your university about the possibility of tuitions waiver before applying.
詳細は、在籍大学の担当者にお尋ね下さい。

■ **Application Form for Exchange Student/ The School of Law and the Graduate School of Law, Nagoya University**

■ 名古屋大学　法学部・大学院法学研究科　交換留学入学志願書

写真 PHOTO

40mm×30mm

* TYPE or PRINT all information in Roman letters and Arabic numerals.

*署名以外、英字はすべてタイプ又は楷書で記入のこと。数字は算用数字を用いること。

1. Name (氏名): _____ (　　) _____ (　　)
   family name/姓　漢字　given name(s)/名　漢字

2. Sex (性別): Male (男) / Female (女)

3. Date of birth (生年月日): _____/_____/_____
   yr. (年)　month. (月)　day (日)

4. Country of citizenship (国籍): _____

5. A mailing address for all admission correspondence (入学等に係わる書類の送付先) : _____

   _____

   _____

   tel/fax: _____ e-mail: _____

6. Name of current university/institution（在学大学名）: _____

7. 'Major' at university（現在の専攻分野）: _____

8. Prospective enrolment status. Circle or check one according to the purpose of your study.（在籍身分）
   □ Special Undergraduate Student (those enrolled in undergraduate course)
   特別聴講学生: 学部に所属し授業を履修する学生身分
   □ Special Graduate Student (those who enroll in a graduate course and wish to take courses to get credits)
   大学院特別聴講学生: 授業科目を履修し単位取得を目的とする大学院生
   □ Special Research Student (those enrolled in a graduate course and conduct research, but cannot get credits under this status)
   特別研究学生: 大学院生で研究目的の交換留学生
   □ Special Short-term Training Student (those who are students of a foreign university and wish to receive instruction related to practical training or other matters on a special topic at Nagoya University)
   特別短期研修学生　外国の大学の学生で、本学において特別の事項について実習等の指導を受けようとする者

9. Planned period of enrolment at Nagoya University. Circle or check one:（在籍希望学期）
   □ Autumn Semester Only (Early October ~ Early March)　□ Autumn & Spring Semesters (Early October ~ Early September)
   □ Spring Semester Only (Early April ~ Early September)　□ Spring & Autumn Semesters (Early April to Early March)
   □ Others

10. Taking into account academic requirements at your home institution (semester dates, summer school, etc.), specify your intended period of residence in Japan.（在日予定期間）:

    From _____ to _____
    month/　year　　month/　year

11. Applicants who intend to enroll as **a Special Undergraduate Student** or **Special Graduate Student** are expected to take courses offered at the School of Law or the Graduate School of Law academic program. Please list up the courses which you are interested to take. The lists of the subjects of the courses are available at the website of our school, as given below.
特別聴講学生または大学院特別聴講学生を希望する場合は、本学部・研究科で開講している授業科目の中で、聴講を希望する科目を下記に記載してください。なお、聴講科目は下記の本学部・研究科のホームページを参照ください。
https://www.law.nagoya-u.ac.jp/faculty-of-law-graduate-school/index.html
And the information on Japanese Language Programs of Language Education Center is available at the following website. 日本語学習については、言語教育センターのホームページを参照して下さい。
https://lec.nagoya-u.ac.jp/jled/program_uj.html

1_____ 2_____ 3 _____
4_____ 5_____ 6_____
7_____ 8 _____ 9_____
10 _____ 11_____ 12_____

12. Those who wish to enroll as Special Research Student must provide a concrete description of their academic interests/plan of study while at Graduate School of Law, Nagoya University in **Japanese or English in the blank space below or a separate sheet of A4-sized paper.**
（名古屋大学法学研究科における専攻予定、具体的な研究計画書を下記のスペース、あるいは、A4用紙に記載し必ず添付すること。様式は自由）

I, the undersigned, certify that the above statements are true and accurate, and hereby apply to participate in the Exchange Program at the Nagoya University Graduate School and School of Law.

Applicant's signature/ 出願者サイン: _____ Date 年月日: _____

Personal Data Sheet/個人情報

Information provided on this form will be used solely for immigration application, counseling and in cases of emergency.（個人情報は、入国管理手続き、学生指導及び緊急時のみに使用されます。）

1. Name (氏名): _____ (　　) _____ (　　)
family name/姓　漢字　given name(s)/名　漢字

(　　) (　　)
カタカナ　カタカナ

2. Sex（性別): Male（男）/ Female（女）　3. Date of birth（生年月日): _____/_____/_____/
yr. (年)　mo. (月)　day (日)

4. Place of birth (出生地): (1). Country (国):_____(　　)(2)State(州)_____(　　)
漢字　漢字

(3) City/Town(市町村) _____(　　)(4) Country of Citizenship(国籍) _____

5. Passport (旅券) (1) Number (番号): _____　(2)Date of issue (発行年月日): _____/_____/_____
yr. (年)　mo. (月)　day (日)

(3) Date of expiration (発行年月日): _____/_____/_____ (4) Issuing Authority (発行期間): _____
yr. (年)　mo. (月)　day (日)

6. Nearest Japanese Embassy/Consulate（査証申請予定地の日本大使館。領事館）: _____

7. Nearest international airport to home university（在籍大学所在地の空港) _____

8. Past entry into/stay in Japan (過去の出入国暦): Yes (有) ____ time(s)(回数)　No (無)

9. The family already residing in Japan (在日家族):

Relationship 本人との関係	Name 氏名	Age 年齢	Citizenship 国籍	Plan to reside with, or not 同居予定の有無	Occupation 職業	Residence Status (Period of Stay) 在留資格(在留期間)

10. The total period of education<Primary school to last year of study completed>(修業年数＜小学校～最終学歴＞)

_____ Yrs. (年)

11 Marital status: Single (未婚)/Married (既婚)/Other (他) _____

12. Person to be notified in the home country in case of an emergency (緊急時における出身国連絡先):

Name (氏名): _____ Relationship (本人との関係): _____

Address (住所): _____

_____

Language Proficiency / 語学力

1. Write down the language(s) you speak or write, and rate your language ability using a scale from 1 to 5 (5 = native, 4 = fluent, 3 = competent, 2 = adequate, 1 = poor).

読むことができる，話すことができる言語名を書いて5段階評価（5＝母国語,4＝極めて流暢，3＝流暢，2＝ある程度流暢，1＝乏しい）で語学力を評価してください。

(1) English: 英語 written 書く能力 _____, spoken 話す能力 _____

(2) Japanese: 日本語 written 書く能力 _____, spoken 話す能力 _____

(3) _____: other language 他の言語 written 書く能力 _____, spoken 話す能力 _____

(4) _____: other language 他の言語 written 書く能力 _____, spoken 話す能力 _____

2. If you have taken any foreign/second language examination (e.g., TOEFL, TOEIC, IELTS, Japanese Language Proficiency Examination), please state the name(s) of the examination(s), the score(s) that you obtained, and the date(s) you took the examination(s). 外国語能力試験（例:TOEFL, TOEIC, IELTS, 日本語能力試験）を受けた方は，その試験名，結果，受験した日を記入してください。

Examination: 試験名 _____ Score: 点数 _____ Date taken: 受験した日 _____

Examination: 試験名 _____ Score: 点数 _____ Date taken: 受験した日 _____

Examination: 試験名 _____ Score: 点数 _____ Date taken: 受験した日 _____

3. In what language(s) do you intend to conduct your research at Nagoya University?
名古屋大学では何語を使って研究を行なう予定ですか？

_____

_____

_____

4. In what language(s) do you intend to communicate with your advisor at Nagoya University?

名古屋大学では何語で指導教官から指導を受ける予定ですか？

_____

_____

_____

在籍証明書

Enrollment Certificate

申請者氏名 Name of applicant	
在籍大学名 Name of institution	
在籍学部/研究科 Faculty / School	
学年*1 School year*1	☐ 学部 (Undergraduate) 学年 ☐ 修士 (Master's) School year ☐ 博士 (Doctorate)
卒業/修了予定年月 Expected date of completion / graduation	年 Year 月 Month
取得予定学位 Expected degree	☐ 学部 (Bachelor's degree) ☐ 修士 (Master's degree) 専攻 Major ☐ 博士 (Doctorate degree)
留学先大学名 Host institution in Japan	

提出年月日 年 月 日
Date Year Month Day

氏名
Name _____

職名
Title _____

署名
Signature _____

*1 申請時の学年を記入してください。
*1 Please fill in the school year at the time of application

注：申請書の在籍大学の責任者が記入して下さい。
Note: This form should be filled in by the authorized person of the applicant's home institution.

■ Confidential Reference Form/ 評価表・推薦状

□ To be signed by the applicant :

I hereby waive my right to read this reference form, which will be entered into at Nagoya University, If at any time I wish to withdraw this waiver, I may do so and authorise the university to return this reference to the author at that time.

私は、名古屋大学に提出されるこの評価表・推薦状を読む権利を次に署名することにより、放棄します。また、権利放棄を変更する場合は、名古屋大学がこれを評価・推薦者へ返却することに異議はありません。

Applicant's signature (署名) _____ Date (日付)_____

☐ To be completed by the referee:

Name of applicant(出願者氏名) _____

1. How long have you known the applicant? In what capacity? (出願者をどういう関係でどれ位の期間知っていますか。)

2. Please rate the applicant in comparison with students at the same level in the following areas using a 4 – 1 scale.
(次の各項目について、同学年の学生と比較した出願者の評価を 4,3,2,及び 1 で書いてください。)

4 = outstanding (優) 3 = good（良） 2 = average (平均) 1 = below average (平均以下)

Academic ability (学力)____ Motivation & diligence (熱意・勤勉さ)_____ Maturity (精神的成熟度) _____

3. Please give your candid opinion regarding the applicant's academic performance, character and adaptability.
(出願者の学力、人物、適応性等について、忌憚のない意見を書いてください。)

Signature（署名）_____ Date(日付) _____

Name<Please Print> （氏名）: _____

Title or position（役職名） : _____

e-mail : _____

NB. After completing this form, put it in an envelope, seal and sign your name over the seal.
(この用紙に記入し、封筒に入れ封印、その上に署名をしてください。)

資 金 計 画 書/ Forms for Financial Resources

1. 経費負担申告書/ Statement of Financial Resources

氏名/ Applicant’s name _____

国籍/ Nationality _____

名古屋大学での留学期間における諸経費の負担方法について該当するものにチェックして、下記の質問に従って記入して下さい。
We would like to know how you finance yourself through the study period at Nagoya University.
Please make a check in the appropriate box fill in the following questions.

注/ Note:
経費支弁者が経費負担をする場合は、経費支弁者による「2. 経費支弁書」の記入が必要です。
Please be filled out the form of the ‘Declaration of Financial Support’ by the sponsor, in case you are planning to be financed by the sponsor.

経費負担方法/ Method of Support

□自己負担/ Self:

注/ Note:
銀行通帳のコピーを提出して下さい。/ Please submit the copy of your bank statement.

□日本国外在住の支弁者からの送金/ Remittance from your sponsor outside Japan:

氏名/ Name: _____
住所/ Address: _____
電話・電子メール/ Phone & Email: _____
職業/ Occupation: _____
志願者との関係/ Relationship with the applicant: _____

□日本国内在住による支弁/ Sponsor in Japan:

氏名/ Name: _____
住所/ Address: _____
電話・電子メール/ Phone & Email: _____
職業/ Occupation: _____
志願者との関係/ Relationship with the applicant: _____

□奨学金/ Scholarship:

□ 外国政府から/ From a foreign government
□ 日本政府から/ From the Japanese government
□ 地方自治体から/ From a local government
□ 公益団体から/ From a public service corporation
□ その他団体から/ Others (　　)

注/ Note:
奨学金証明書を提出して下さい。/ Please submit a certificate of your scholarship.

□その他の方法/ Others:

(　　)

2. 経費支弁書/ Declaration of Financial Support

氏名/ Applicant’s name _____

国籍/ Nationality _____

私は、このたび上記の者が、日本国に入国、在留した場合の支弁者になりましたので、下記のとおり経費支弁の引受け経緯を説明するとともに、経費支弁について証明します。
I declare myself to be the financial sponsor of the above person at the entry and during his/her present stay in Japan. Please find below an explanation of my reasons for undertaking this role as well as verification of financial details.

１　経費支弁の引受経緯　（申請者の経費支弁を引受けた経緯及び申請者との関係について具体的に記載してください。）/ Reasons for becoming financial sponsor. (Please explain the circumstance in concrete details for undertaking the role of financial sponsor and the relationship between you and the applicant.)

２　経費支弁内容/ The particulars of the financial payment

私_____は、上記の者の日本国滞在について、下記のとおり経費支弁することを証明します。また、上記の者が在留期間更新許可申請を行う際には、送金証明書又は本人名義の預金通帳（送金事実、経費支弁事実が記載されたもの）の写し等、生活費等の支弁事実を明らかにする書類を提出します。

I, _____, testify the following financial commitments of the above person during his/her stay in Japan.
In addition, in the case that the above person applies for permission to extend the period of stay, I will submit a copy of the certification of remittance or the bankbook for the account under my name (with the records of remittance and financial payment in it) as proof of payment of living expenses or other.

（１）学費/ Tuition fee _____円(yen)　毎月(per month)・半年ごと(per half a year)・毎年(per year)
（２）生活費/ Living expenses _____円(yen)　毎月(per month)
（３）支弁方法（送金・振込み等、支弁方法を具体的に書いてください。）/ Methods of payment (Please indicate specifically the procedures of remittance, transfer and other methods of payment.)

_____年(year) _____月(month) _____日(day)

経費支弁者/ Financial sponsor
住所/ Address: _____
電話・電子メール/ Phone & Email: _____
氏名/ Name: _____ 署名(Signature) _____
志願者との関係/ Relationship with the applicant: _____

健康診断書
CERTIFICATE OF HEALTH (to be completed by the examining physician)

日本語又は英語により明瞭に記載すること。
Please fill out (PRINT/TYPE) in Japanese or English.

氏名
Name: _____ , _____ _____
Family name, First name Middle name

□男 Male □女 Female
生年月日 Date of Birth: _____

1．身体検査
Physical Examination

(1) 身　長 Height_____ cm　体　重 Weight_____ kg

(2) 血　圧 Blood pressure_____ mm/Hg～_____ mm/Hg　血液型 Blood Type [A B O | RH ＋ ＿]　脈拍 Pulse □整 Regular □不整 Irregular

(3) 視　力
Eyesight: (R)_____ (L)_____ 裸眼 Without glasses　(R)_____ (L)_____ 矯正 With glasses or contact lenses
色覚異常の有無 Color blindness □正常 Normal □異常 Impaired

(4) 聴　力 Hearing: □正常 Normal □低下 Impaired
言　語 Speech: □正常 Normal □異常 Impaired

2．申請者の胸部について，聴診とＸ線検査の結果を記入してください。Ｘ線検査の日付も記入すること（６ヶ月以上前の検査は無効。)
Please describe the results of physical and X-ray examinations of the applicant's chest X-rays. (X-rays taken more than six months before the certification are NOT valid).

肺 Lungs: □正常 Normal □異常 Impaired
← Date _____
Film No. _____
Describe the condition of applicant's lungs.

心臓 Cardiomegaly: □正常 Normal □異常 Impaired
↓
異常がある場合
心電図 Electrocardiograph :□正常 Normal □異常 Impaired

3．現在治療中の病気 Disease currently being treated □Yes (Disease_____) □No

4．既往症（いずれも該当しない場合は、なしにチェックすること。）
History: Please indicate with ＋ or － and fill in the date of recovery
(If the applicant has not contracted any of the diseases, please check “None.”)

Tuberculosis.....□(. .) Malaria.....□(. .) Other communicable disease.....□(. .)
Epilepsy.....□(. .) Kidney disease.....□(. .) Heart disease.....□(. .)
Diabetes.....□(. .) Drug allergy.....□(. .) Psychosis.....□(. .)
Functional disorder in extremities.....□(. .)
None..□

5．検　査 Laboratory tests
検　尿 Urinalysis: glucose ( ), protein ( ), occult blood ( )

赤沈 ESR:_____mm/Hr, WBC count:_____ /cmm　貧血 anemia □

Hemoglobin:_____ gm/dl, GPT:_____

6．診断医の印象を述べて下さい。（問題がない場合も、その旨ご記入ください。）
Please give your impression of the applicant’s health. (If you do not have a particular opinion, please write as such.)

7．志願者の既往歴，診察・検査の結果から判断して，現在の健康の状況は充分に留学に耐えうるものと思われますか？
Given the applicant's history and the above findings, is it your observation that his/her health status is adequate to pursue studies in Japan?

Yes □　No □

日付 Date: _____　署名 Signature: _____

医　師　氏　名
Physician's Name in Print：_____

検査施設名
Office/Institution:
所在地
Address: _____