

Center for Japanese Studies
University of Hawaii at Manoa
JAPAN STUDENT EXCHANGE PROGRAM
(University of the Ryukyus)
INSTRUCTIONS TO APPLICANTS

Thank you for your interest in the Student Exchange Program. Enclosed you will find information and an application for the Program. A complete application consists of:

- 1) application form with all signatures
- 2) one letter of recommendation
- 3) foreign language proficiency form
- 4) official transcripts from every college attended
- 5) photocopy of your passport identification page. If you do not have a passport at the time of the deadline, please note this on your application form, and this requirement will be waived. However, if you are chosen to participate in the exchange program, you must get a passport and provide a copy of the page.
- 6) two passport photos

In completing the application, you should take the following steps:

- 1) Complete and sign the application. Send, or deliver by hand the application to the address indicated below.
- 2) Ask a Japanese-language instructor/professor to fill out the proficiency form. Tell him/her to send it directly to CJS.
- 3) Ask another faculty member to write a letter of recommendation. Tell him/her to send it directly to CJS.
- 4) Have official transcripts from every college you have attended sent to CJS.

All parts of the application should be returned to:

Dr. Gay Satsuma
Center for Japanese Studies
University of Hawaii at Manoa
1890 East-West Road, Moore Hall 216
Honolulu, HI 96822

All application materials must reach the above address by the deadline: January 19 (Friday), 2007.

You will be informed of the decision on your application within four weeks of the application dead-line. If you have any questions about the Program or application procedure, please contact Dr. Gay Satsuma at tel. (808) 956-2664; fax. (808) 956-2666; e-mail gay@hawaii.edu.

*** Minimum requirements: Students must have at least a 3.0 cumulative GPA and a year of Japanese language. Applicants for the University of the Ryukyus exchange must have completed at least two years of college by the fall of 2007.**

JAPAN STUDENT EXCHANGE PROGRAM APPLICATION

For the University of the Ryukyus

Center for Japanese Studies
 University of Hawaii at Manoa
 1890 East-West Road, Moore Hall 216
 Honolulu, HI 96822

PLEASE TYPE OR PRINT WITH BALL-POINT PEN

APPLICATION DEADLINE: JANUARY 19, 2006

| FOR OFFICE USE ONLY | |
|---------------------|-------|
| Principal | _____ |
| Alternate | _____ |
| Conditional | _____ |
| Not Recommended | _____ |

| BIOGRAPHICAL DATA | | | |
|--|---------------------------------------|----------------------------|----------------------------|
| 1) Name | _____ | | |
| 2) UH Identification Number | _____ | 3) Birth Date | Month / Day / Year _____ |
| 4) Sex (circle one) | M / F | 5) Home Campus | _____ |
| 6a) Country of Citizenship | _____ | 6b) Hawaii Resident? | Yes / No _____ |
| 7) Order of Preference (1st, 2nd, etc.) according to applicant's campus. This Application is only for the Ryukyus | | | |
| UHM: Doshisha _____, Hiroshima _____, Kyoto _____, Nanzan _____, Ryukyus _____, and Sophia _____ | | | |
| ----- UH West Oahu, UH Hilo and Community Colleges: Doshisha _____, Nanzan _____, Ryukyus _____ | | | |
| 8) Mailing Address | Number and Street _____ | City _____ | State _____ Zip Code _____ |
| | Telephone Number _____ | E-mail _____ | |
| ACADEMIC BACKGROUND | | | |
| 9) Major or Prospective Major | _____ | 10) Graduation Date/Degree | _____ / _____ |
| 11) Grade Point Average | In Major/Field _____ Cumulative _____ | | |
| 12) Semester Credits Completed to Date | Undergraduate _____ Graduate _____ | | |
| 13) Academic Advisor's Name | _____ | | |
| 14) Colleges or Universities Attended | | | |
| Name of Institution | From | TO | Degrees Honors |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| 15) Japanese language courses you will have taken prior to the beginning of the exchange program (Fall 2007) | | | |
| Course Title | Credits | Grade | Name of Institution |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Student Exchange Program Application
 Center for Japanese Studies
 University of Hawaii at Manoa
 Moore 216

Applicant Name (Print) _____
 UH Identification Number _____

16) Non-language courses relating to Japan which you have taken or plan to complete before Fall 2007

| Course Title | Credits | Grade | Name of Institution |
|--------------|---------|-------|---------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

MISCELLANEOUS

17) Please describe, in as much detail as possible, your plans for financing your participation in an overseas study program. (Use a separate page if necessary.) Have you received an AIEJ/JASSO Scholarship to go on a previous overseas study program? Will you be able to provide financial documents such as a bank statement to verify support?

18) Previous travel overseas. If this includes travel in Japan, describe in more detail, giving dates and duration and location of stay. (Use separate page if necessary.)

| Country | DATES | | Purpose |
|---------|-------|-------|---------|
| | From | To | |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

19) What interests and/or hobbies do you have?

20) In what organizations and/or activities do you participate?

Student Exchange Program Application
 Center for Japanese Studies
 University of Hawaii at Manoa
 Moore 216

Applicant Name (Print) _____
 UH Identification Number _____

21) State briefly any additional information that may be useful to the selection committee in evaluating your candidacy.

22) List the names, titles and addresses of those from whom you have requested recommendations.

| Name | Title | Address |
|-------|-------|---------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

23) How did you find out about this program?

Program Alumni
 Faculty Member
 Class Announcement
 Bulletin Board
 Newspaper Ad
 Other (please specify)

24) In the space provided on the following page, provide a concise statement of your personal goals and long-range career or educational objectives and how these are likely to be furthered by your proposed program of study abroad.

25) Read the following, sign and date.

I certify that all the information given within this application is true and complete. I agree to release any and all records and transcripts held by any institution to:

Dr. Gay Satsuma
 Center for Japanese Studies
 University of Hawaii at Manoa
 1890 East-West Road, Moore Hall 216
 Honolulu, HI 96822

as necessary for my participation in the Student Exchange Program. I understand that as a participant in the Program, I shall be subject to certain rules and requirements of this University and of cooperating Universities in the U.S. and overseas, which I agree to fulfill in all respects, subject to immediate dismissal from the Program if I do not do so. I agree to assume financial responsibility for the Program fees as indicated.

Signature of Applicant
Date

Student Exchange Program Application
Center for Japanese Studies
University of Hawaii at Manoa
Moore 216

Applicant Name (Print) _____
UH Identification Number _____

STATEMENT OF PURPOSE

Empty box for the Statement of Purpose.

FOREIGN LANGUAGE PROFICIENCY FORM
STUDENT EXCHANGE PROGRAM

| | | | | | | |
|---|-----------|----------------------|--------|-------|------------|---------------|
| Applicant's Name | Last | First | Middle | | | |
| UH Identification Number | | | | | | |
| 1) Please check the appropriate spaces to indicate your assessment of the applicant's present ability in Japanese language. | | | | | | |
| | Excellent | Good | Fair | Poor | No ability | Cannot Assess |
| Reading in his/her field | _____ | _____ | _____ | _____ | _____ | _____ |
| Understanding lectures | _____ | _____ | _____ | _____ | _____ | _____ |
| Composition | _____ | _____ | _____ | _____ | _____ | _____ |
| Conversation | _____ | _____ | _____ | _____ | _____ | _____ |
| 2) Please indicate the experience with this student upon which your evaluation has been made. | | | | | | |
| | | | | | | |
| 3) Please explain why or why not the student would perform well in an exchange program. Please provide examples. | | | | | | |
| | | | | | | |
| 4) Please add in the space below or on the reverse side any comments that you feel would aid in understanding the candidate's qualifications. | | | | | | |
| | | | | | | |
| Evaluator's Name (Print) | | Title and Department | | | | |
| Institution | | Signature | Date | | | |
| <p>Please return this form by January 19, 2007 to:</p> <p style="text-align: right;">Dr. Gay Satsuma Center for Japanese Studies University of Hawaii at Manoa 1890 East-West Road, Moore Hall 216 Honolulu, HI 96822 Tel. (808) 956-2664 Fax. (808) 956-2666 E-mail. gay@hawaii.edu</p> | | | | | | |

RECOMMENDATION FORM

STUDENT EXCHANGE PROGRAM

| | | | |
|--|-----------|------------------------|-----------|
| Applicant's Name | Last | First | Middle |
| UH Identification Number | | | |
| I hereby waive my rights of access to this recommendation as provided in the Education Rights and Privacy Act of 1974. | | | |
| _____ Signature of Applicant | | _____ Date | |
| TO THE APPLICANT: Complete the top part of the form. Your application requires a faculty recommendation. The faculty member who writes this recommendation should be different from the one who fills out the proficiency form. If there is another person you feel is qualified to comment on your preparedness to study overseas, please feel free to send a second letter of recommendation. (Copy this form.) | | | |
| ***** | | | |
| TO THE RECOMMENDER: The above student has applied for admission to the Student Exchange Program. The Program is for one or two semesters overseas under the supervision of a representative of this or a cooperating university. Such study places unusual demands on the student, requiring a greater degree of adaptability and of concentration than is usually the case on the campus. Your frank appraisal of the student will be appreciated. If the student has signed the above release, your comments will be held in confidentiality. | | | |
| 1) How long have you known the applicant, and in what context? | | | |
| | | | |
| 2) Please rank the applicant on the following traits. (1 = Excellent; 2 = Good; 3 = Fair; 4 = Poor; X = Unknown) | | | |
| Academic ability | 1 2 3 4 X | Linguistic ability | 1 2 3 4 X |
| Adaptability | 1 2 3 4 X | Intellectual curiosity | 1 2 3 4 X |
| Articulateness | 1 2 3 4 X | Persistence | 1 2 3 4 X |
| Ability to get along with others | 1 2 3 4 X | Self reliance | 1 2 3 4 X |
| Emotional maturity | 1 2 3 4 X | Sensitivity to others | 1 2 3 4 X |
| 3) Please comment on the applicant's academic strengths and weaknesses. | | | |
| | | | |
| 4) Please comment on the applicant's personal qualities, positive and negative, that would bear on his/her ability to adapt to the unusual demands of living and studying overseas. (Comments may be continued on the next page.) | | | |
| | | | |

| |
|------------------------|
| 5) Additional comments |
| |

| |
|--|
| 6) My overall recommendation of this candidate for admission to the Student Exchange Program is: |
|--|

| | | | |
|-----------------------|-----------|------------------------------------|------------------|
| Strongly Recommend | Recommend | Recommend with some reservation | Do not recommend |
|-----------------------|-----------|------------------------------------|------------------|

| | |
|---------------------|--|
| Signature | |
| Name (please print) | |
| Title | |
| Address | |
| Telephone Number | |

Please return this form by January 19, 2007 to:

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