

# Application for Cross-Cultural College CP Core Courses

**Note:** Information provided on this form will be used for CCC administrative purposes only and be held strictly confidential.  
Kwansei Gakuin University will take full responsibility for the storage and disposal of this data.

## Personal Information

*\*Select from the pull-down menu*

Program Choice :

Home University :

Faculty :

Year (Standing) :  (as of 30th June 2024)

Major(s) :

Photo

3 cm x 4 cm  
full-face  
taken within the last  
3 months

Legal Name in Alphabet:      
Last/Family First Middle Preferred

Legal Name in *Kanji*, if Applicable:   Sex: Male ☐ Female ☐  
Last First

Nationality:  Date of Birth:    Birthplace:   
Country of Citizenship (Passport) Day Month Year City, Country

Present Mailing Address:    
Include Your Full Address Country

Address Effective Until:     
Postal Code/ZIP Tel (mobile) Fax Day Month Year

E-mail (University):  @

E-mail (Alternate):  @

*\*Please check your university e-mail account regularly, as KGU will send all the necessary information to this e-mail address.*

Permanent Address:    
Include Your Full Address Country  
    
Postal Code/ZIP Tel Fax

## Emergency Contact Person

Full Name:  Relationship:  Tel (Home):

Tel (Mobile):  Fax:  E-mail:

Address:    
Include Full Address Country  
  
Postal Code/ZIP

Yes ☐ No ☐

**Dietary Restrictions?** Fill in details when the answer is "Yes".

**Medical History** / Please feel free to list any other important information here.

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## Language Abilities

Please rate your language skills.

My spoken English level is      Native      Advance ☐      Intermediate  
My written English level is      Native      Advance ☐      Intermediate ☐

History of Japanese Study      Yes      No

Fill in details when if answer is "Yes".

Do you speak any other languages?      Yes ☐      No ☐

If yes, what language do you speak and to what extend? (Native, Advance, Intermediate, Beginner)

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## Statement of Intent

What is your goal in this CCC program? How do you like to utilize this experience when you finish the program?

What failures have you experienced as a university student, and what lessons did you learn from them?

Why do you wish to participate in a collaboration program with the Canadian/Japanese university?

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I certify that to the best of my knowledge, all statements herein and all supporting documents are correct, complete, and my own.

Signature:

Date :

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