

CERTIFICATE OF APPLICATION

GRIPS ID:	Nationality:	
Name:		Photograph
Name.		Please write your name on the
Address:		back of each photo
	Zip Code:	
Phone:	Fax:	
	Country code - complete number Country code - complete number	
Email:		

Program(s) you are applying for:

Master's programs

One-year Master's Program of Public Policy (MP1)

Two-year Master's Program of Public Policy (MP2)

Macroeconomic Policy Program (one year)

Macroeconomic Policy Program (two years)

Public Finance Program (Tax)

Public Finance Program (Customs)

Five-year Ph.D. Program

Policy Analysis Program

Three-year Ph.D. Programs

Public Policy Program

Security and International Studies Program

Science, Technology and Innovation Policy Program

State Building and Economic Development Program

Funding

How are you planning to fund your studies at GRIPS?

I would like t	to be considered	for a scholarship	allocated through	GRIPS

I will obtain funding from other institutions.

I will finance myself.

I certify that to the best of my knowledge all information given in the Online Application Form is correct and complete, and I understand that any omission or misinformation concerning enrollment in colleges or universities may invalidate my admission or result in dismissal.

Signature of the applicant:

Date:

Month/Day/Year

Please submit this certificate to the Admissions Office along with other supporting documents by courier or registered mail.



CERTIFICATE OF EMPLOYMENT

me of organization:				
dress:				
ione:	Fax:		Email:	
Country code - complete num	nber Co	ountry code - complete number		
		Full name of applic	ant	
EMPLOYEE DETAILS This is to certify that	anization from	Full name of applic	rantto	
his is to certify that	anization from	Full name of applic		Month/Day/Year
his is to certify that		Month/Day/Year		·

LEAVE OF ABSENCE APPROVAL

One year

I will approve a leave of absence for the above employee to study at GRIPS if he/she is admitted for the duration of (please tick the appropriate box)

Three year	
Five year	
Details authori	ized person completing the form:
	h
Name:	
Name: Position/Title:	
Name:	
Name: Position/Title:	Month/Day/Year

Please put an official stamp or seal in this space.



STATEMENT OF PURPOSE

For GRIPS use:

Please state your purpose for studying at GRIPS, the area of study you wish to pursue, your short-term and long-term career goals, and how your qualifications and experience match the requirements of the program you are applying for. Summarize your present duties and responsibilities and describe how your studies at GRIPS might contribute to your career.



RESEARCH PROPOSAL

For GRIPS use:

For applicants to the Policy Analysis Program (PA) and Ph.D. Programs only.

Please write a research proposal for your study. The research proposal must contain a clear statement of the problem, a succinct review of the relevant literature, a research question or purpose, a description of the proposed methodology, and the rationale behind choosing that particular methodology. All sources must be properly documented. Your proposal should be 2-4 pages long.



LETTER OF RECOMMENDATION

′ou	r name:				
As written in your passport					
Rec	ecommender's name:				
eal ema	THE RECOMMENDER: Please write a recommendation letter for the above applicant, sign it, enclose it in an envelope, the envelope, and sign it across the flap. Return the sealed envelope to the applicant. This recommendation letter will ain confidential and will be used for application screening purposes only. You may attach additional sheets if the space ided is insufficient.				
	How long have you known the applicant? years months				
•	In what capacity have you known the applicant?				
-	How often have you interacted with the applicant?				
	Daily Weekly Monthly Rarely				
	In comparison with other students/staff whom you have known in the same field, how would you rate the applicant's overall <u>academic</u> ability? Outstanding (top 5%) Excellent (top 10%) Good (top 20%) Average (top 50%)				
	Below average (lower 50%) Unable to comment				
	In comparison with other students/staff whom you have known in the same field, how would you rate the applicant's overall professional ability? Outstanding (top 5%) Excellent (top 10%) Good (top 20%) Average (top 50%) Below average (lower 50%) Unable to comment				
	Please evaluate the applicant in the areas below as <i>excellent</i> , <i>average</i> , <i>poor</i> , <i>or unable to comment</i> .				
	Excellent Average Poor Unable to comment Academic performance Intellectual potential Intellectual potential Intellectual potential Creativity & originality Intellectual potential Intellectual potential Intellectual potential Motivation for graduate study Intellectual potential Intellectual potential Intellectual potential				

7.	For university professors a Is the applicant's academic r	and instructors only ecord indicative of the	applicant's intellectual	l ability? If no, please explain.
8.	Discuss the applicant's comp	petence in his/her field	l of study, as well as the	e applicant's career possibilities as
	a professional worker, resea potential, and maturity, pleas than generalizations.	rcher, or educator. In se discuss both strong	describing such attribu and weak points. Spec	tes as motivation, intellectual cific examples are more useful
9.	Discuss the applicant's chara stability, leadership skills, an	acter and personality. d reliability.	Please comment on his	s/her social skills, emotional
10.	Additional comments, if any.			
11.	How would you evaluate the program at the National Grad			for admission to a graduate
	Outstanding	Good	Average	Poor
Name	e of person completing this for	m:		
Addre		Eax:		Email:
1 11011	Country code - complete nur		de - complete number	Email:
Signa	ature:		Date:	Month/Day/Year

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