

# NATIONAL GRADUATE INSTITUTE FOR POLICY STUDIES

For GRIPS use: Application ID	Í

<b>APPLICATION FOR ADMISSION 2020-2021</b>	
Program or course you are applying for (Please <u>tick</u> only one box below.)  Young Leaders Program (School of Government)  Young Leaders Program (School of Local Governance)	Photograph  Taken within the last three months, providing a clear, front view of your
Maritime Safety and Security Policy Program	entire face. (4cm x 3cm)
(Please type or print, and use normal text, NOT "ALL CAPITAL LETTERS.")  Please complete each section as fully and accurately as possible. Please respond to all question information you provide is essential in reviewing your application.  Please note that if you provide any false or misleading statement or incomplete or inaccurate inform application may not be screened, you may be denied admission or, if you have been admitted, you may	s. The nation in your application, your
PERSONAL DATA	
1. Full name:  As written in your passport, from left to right, top to bottom (English alphabet only)	
2. Date of birth: 3. Age (as of October 1, 202 Month/Day/Year	20):
4. Gender:	
5. Nationality:	
6. Present employer (name of organization):	I will quit my job.)
Postal code: Country:	
TEL: FAX: Country code – complete number	
9. Residential address:	
Postal code: Country:	
TEL: FAX: Country code – complete number	
10. Preferred mailing address:  Work  Residence  Other, namely (Fill in the following Address:	g fields.)
Postal code: Country:	
TEL: FAX: Country code – complete number	
11. E-mail 1:	

#### **APPLICATION INFORMATION**

12. List the names of the undergraduate and graduate (if applicable) institutions you attended or are currently attending. Enter the names of the degrees you received and the dates of enrollment at each institution. If your official transcript of academic records or graduation/degree certificate states your GPA, honors, class, or rank, enter this information as it is shown in your transcript or certificate. The field(s) "Year & month of graduation" must be completed in accordance with the date(s) on which your degree(s) was (were) awarded/conferred, as stated in your official graduation/degree certificate(s). If there is insufficient space for entering all the institutions you have attended, please add new rows as needed.

From primary to secondary education (before tertiary education)  Tertiary education  Full name of institution & month of education (city & country)  Tending from (to) Suration of schooling  Year & month of graduation  Year & month of graduation  Name of degree			Period of attendance				Duration of	
(before tertiary education)  Tertiary  Full name of institution & Year & Year & Duration of schooling degree degree of the second of the secon	From primary to secondary education	` ′		` '				
Tertiary Full name of institution & month of month of schooling degree							and	
	•			month	of	month of		

Tertiary education	Full name of institution & location (city & country)	Year & month of enrollment	Year & month of graduation	Duration of schooling	Name of degree	GPA (if available)	Honors/ class/rank/ division (if available)
Undergraduate				years and months			
level (Bachelor's)				years and months			
Graduate level (Master's/ Doctoral)				years and months			
				years and months			

Total number of years and months of education * (from elementary education to undergraduate/graduate education inclusive)	years and months
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13. English	proficiency:
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One of the following test scores is required. Please note that English test scores are valid for two years from the test date, and therefore, tests must have been taken within two years of the time of enrollment at GRIPS.

	TOEFL iBT:			The minimum acceptable test score is 79.
		Score	Month/Day/Year	
	IELTS Academic:			The minimum acceptable test score is 6.0.
		Score	Month/Day/Year	
О	ther information:	Undergradua	ate education inst	ructed in English
		Graduate edu	acation instructed	l in English
L	ocation of the accred	ited institution	where you have	completed or expect to complete an
u	ndergraduate/graduat	te degree:		
		The USA, th	e UK, Canada, A	ustralia, New Zealand, or Ireland
		Other countr	у	

<sup>\*</sup>Calculate and write the total number of years and months of education you will have completed (as detailed above) at the time of your enrollment at GRIPS.

1Name	Position and affili	ation	
2			
Name	Position and affili	ation	
List your current and previous recent position.	ous employment (up to five positions) in reverse chro	onological order,	starting with
		Da	ites
Organization, type, & city	Job title and description (maximum 20 words)	(from) Month, year	(to) Month, yea
<u>CERTIFICATION</u>			
I certify that to the best of	my knowledge all information given above is correct	and complete, and	d I understand
any omission or misinform	nation may invalidate my admission or result in dismi	ssal.	
Signature	of the applicant	Month/Day/Year	
-		-	

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



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## **LETTER OF RECOMMENDATION 2020-2021**

	For GRIPS use: Application ID
forn sea	THE APPLICANT: Please complete this section ("Your name" and "Recommender's name"), and give this in to your recommender who knows you well. Have your recommender complete the form, put it in an envelope, all the envelope, sign it across the flap, and return the letter to you. Include this letter with your application and all other application materials when you send in your application.
You	ur name:
	As written in your passport, from left to right, top to bottom (English alphabet only)
Rec	commender's name:
an e dire	THE RECOMMENDER: Please write a recommendation letter for the above applicant, sign it, enclose it in envelope, seal the envelope, and sign it across the flap. Return the sealed envelope to the applicant or send it ectly to the GRIPS Admissions Office. This recommendation letter will remain confidential and will be used for olication screening purposes only. You may attach additional sheets if the space provided is insufficient.
1.	How long have you known the applicant? years months
2.	In what capacity have you known the applicant?
3.	How often have you interacted with the applicant?  Daily Monthly Rarely
4.	In comparison with other students/staff whom you have known in the same field, how would you rate the applicant's overall <a href="mailto:academic">academic</a> ability?  Outstanding (top 5%)  Excellent (top 10%)  Good (top 20%)  Average (top 50%)  Below average (lower 50%)  Unable to comment
5.	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
6.	Please evaluate the applicant in the areas below as excellent, average, poor, or unable to comment.  Excellent Average Poor Unable to comment  Academic performance Intellectual potential Creativity & originality  Motivation for graduate study

7.	as a profe potential,	Discuss the applicant's competence in his/her field of study, as well as the applicant's career possibilities as a professional worker, researcher, or educator. In describing such attributes as motivation, intellectual potential, and maturity, please discuss both strong and weak points. Specific examples are more useful than generalizations.							
8.	Discuss the stability, le	ne applicant's cha eadership skills, a	racter and personality nd reliability.	r. Please comment o	n his/her social skills, emotion	al			
9.	For unive	rsity professors licant's academic	and instructors only record indicative of the	y ne applicant's intelled	ctual ability? If no, please expla	ain.			
10.	Additional	comments, if any							
11.	program a		e applicant's overall s aduate Institute for Po		ate for admission to a graduat	te			
		on completing thi							
	osition/title: ame of orga								
Α	ddress:								
T	EL:	-	FAX:		E-mail:				
۶	ignature:	Country code - comple		Intry code - complete number  Date:					
3	ignature.	_			Month/Day/Year				



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## **STATEMENT OF PURPOSE 2020-2021**

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Please state your purpose for studying at GRIPS, the area of study you wish to pursue, your short-term career goals, and how your qualifications and experience match the requirements of the progra applying for. Summarize your present duties and responsibilities and describe how your studies at GF contribute to your career. If you are still in school, describe your future career aims and explain how your GRIPS would help you achieve them. (300-500 words)	m you are RIPS might	
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