

NATIONAL GRADUATE INSTITUTE FOR POLICY STUDIES

For GRIPS use: Application ID

APPLICATION FOR ADMISSION 2024-2025

(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 questions.

The information you provide is essential in reviewing your application.

Please note that if you provide any false or misleading statement or incomplete or inaccurate information in your application, your application may not be screened, you may be denied admission or, if you have been admitted, you may be dismissed from GRIPS.

Paste your photograph or insert your digital image taken within the last three months, providing a clear, front view of your entire face.

(30 mm wide x 40 mm high)

PERSONAL DATA

1. Ful	Full name:	
	Full name: As written in your passport, from left to right, top to bottom	(English alphabet only)
2. Da	Date of birth: Month/Day/Year	3. Age (as of April 1, 2024):
	Month/Day/Year	
4. Ge	Gender: Male Female	
5. Na	Nationality:	
6. Pro	Program you are applying for (Please tick one box only).	
Ма	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 Program) for ex	xternally funded or self-financed applicants only
	Macroeconomic Policy Program (Two year Program) for ex	xternally funded or self-financed applicants only
	Public Finance Program (Tax)	
	Public Finance Program (Customs)	
	Maritime Safety and Security Policy Program for externall	y funded or self-financed applicants only
Fiv	Five-year Ph.D. Programs	
	Policy Analysis Program (PA)	
Thi	Гhree-year Ph.D. Programs	
	GRIPS Global Governance Program (G-cube)	
	Science, Technology and Innovation Policy Program (STI)	
7. Fu	Funding (Please tick one box only)	
	w do you plan to finance your studies at GRIPS? te: Items 1 and 2 below are only available for overseas applicant	ts.
	1) I would like to be considered for a scholarship allocate	d through GRIPS. (E.g., MEXT, ADB, WB, WCO)
	1 l have completed JICA's entry process for the JICA Science	cholarship.
	3) I will obtain funding from other institutions. (E.g., home	e country scholarship, MEXT extension)
	4) I will finance myself.	

If you select "I will obtain funding from other institutions." or "I will finance myself.", you are required to submit a financial statement at the time of application as proof that you have adequate funding to cover the total cost of your studies (JPY 2,800,000).

Note: Scholarship applicants who are willing to pay for their own admission if they do not receive a

scholarship must provide a financial statement at the time of application.

8. Employment status: Employed	☐ Unemployed
(Does your organization belong to a	central or regional authority? Central Regional Neither) Il be given study leave by my employer. I will quit my job.)
10. Present position, department/section:	
11. Work address:	
Postal code:	Country:
Phone: Country code – complete number	
12. Residential address:	
Postal code:	Country:
Phone: Country code – complete number	
13. Preferred mailing address:	
☐ Work ☐ Residence	\square Other, namely (Fill in the following fields.)
Address:	
Postal code:	Country:
Phone: Country code – complete number	
14. E-mail 1:	
E-mail 2:	

^{*}Please use the same E-mail address(es) as in your Online Registration Form.

APPLICATION INFORMATION

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- List the names of the undergraduate and graduate institutions you attended or are currently attending **in chronological order**.
- 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. If your GPA is 2.9 and the maximum GPA is 4, you should enter 2.9/4. If your GPA is 1.25 and the maximum GPA is 1, you should enter 1.25/1. If your university does not use a GPA system, provide the graduating evaluation in the system used by your university (e.g., A:55, B:3, C:0, Excellent:3, Good:10, etc.). If nothing is available, enter N/A. Please note that we will verify it with the official transcripts that you will send us by post.
- 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.

	Period of attendance		Duration
	(from)	(to)	of
From primary to secondary	Month, year	Month, year	schooling
education			
(before tertiary education)			years
			and
			months

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

16. English proficiency:

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.

□ TOEFLIBT:	Score	Month/Day/Year
☐ IELTS Academic:		
	Score	Month/Day/Year
Other information:	□∪	ndergraduate education instructed in English
	□ G	raduate education instructed in English

^{*}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.

	accredited institution where you have	e completed or exp	pect to complete a	n
	☐ The USA, the UK, Can☐ Other country	ada, Australia, Ne	w Zealand, or Irel	and
17. List below two person requested letters of re-	ons familiar with your academic and ecommendation.	or professional a	bilities, from whor	m you have
1				_
Na	ame	Position and affiliati	ion	
2		Position and affiliati		-
INA	ame	Position and amiliat	On	
	previous employment (up to five pos st recent position. Exclude part-time v	vork and internship	D.	
Organization, type,	Job title and description	(from)	tes (to)	Duration
& city	(maximum 20 words)	Month, year	Month, year	Year and months
				yea an mont
				yea an month
	Total number of years and months of work		year and month	
19. Please write the follo a) Tentative title of your r	wing information for applicants for f research proposal	ive-year and thre	e-year Ph.D. proo	grams.
b) Proposed supervisor				-
c) Title of your master's t	hesis or its equivalent			-

CERTIFICATION Learning that to the best of my knowledge all information of	vivon above is correct and complete, and Lunderstand	
I certify that to the best of my knowledge all information given above is correct and complete, and I understand that any omission or misinformation may invalidate my admission or result in dismissal.		
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.