



บันทึกข้อความ

คณะวิทยาศาสตร์
 รับที่.....
 วันที่ ๕ ธ.ค. 2560
 เวลา 11.00

คณะวิทยาศาสตร์
 4853
 รับที่.....
 วันที่ 25 ส.ค. 2560
 เวลา 11.30

งานบริการการศึกษาและพัฒนาคุณภาพนักศึกษา
 คณะวิทยาศาสตร์ มหาวิทยาลัยเชียงใหม่
 4853
 วันที่ ๕ ส.ค. ๒๕๖๐
 เวลา ๑๕:๕๕

ส่วนงาน วิทยาลัยนานาชาตินวัตกรรมดิจิทัล โทร. 42606 โทรสาร. 42607

ที่ ศธ.6593(22)/ ๑ 115 วันที่ 24 สิงหาคม 2560

เรื่อง ขอลงประชาสัมพันธ์ทุนแลกเปลี่ยนภายใต้โครงการ AIMS ณ Ibaraki University ประเทศญี่ปุ่น

เรียน คณบดีคณะวิทยาศาสตร์

ตามที่ มหาวิทยาลัยเชียงใหม่ได้เข้าร่วมเป็นสมาชิกโครงการแลกเปลี่ยนนักศึกษาระยะสั้นภายใต้

โครงการ AIMS (ASEAN International Mobility for Student) ภายใต้หัวข้อ (Theme) Environmental Science and Management (Waste Management, Disaster Management, Alternative Energy) และได้มอบหมายให้วิทยาลัยนานาชาตินวัตกรรมดิจิทัลเป็นผู้รับผิดชอบโครงการดังกล่าว นั้น

บัดนี้ ทางวิทยาลัยนานาชาตินวัตกรรมดิจิทัลขอประชาสัมพันธ์ทุนแลกเปลี่ยน เพื่อไปแลกเปลี่ยนเป็นระยะเวลา 1 ภาคการศึกษา ระหว่างเดือนเมษายน - สิงหาคม 2561 ณ Ibaraki University ประเทศญี่ปุ่น ในสาขาวิชาที่เกี่ยวข้องกับ Environmental Science and Management โดยทาง Ibaraki University จะให้การยกเว้นค่าธรรมเนียมการศึกษา โดยนักศึกษาจะต้องรับผิดชอบค่าใช้จ่ายอื่นๆ ด้วยตนเอง นักศึกษาที่สนใจสามารถศึกษารายละเอียดเพิ่มเติมได้ที่

<http://www.cmuic.cmu.ac.th/cmuic2016/Home/viewnews/583>

ในการนี้ ทางวิทยาลัยนานาชาตินวัตกรรมดิจิทัลใคร่ขอความอนุเคราะห์คณบดีคณะวิทยาศาสตร์พิจารณาเสนอชื่อนักศึกษาในสังกัดของคณะที่มีคุณสมบัติครบถ้วน ในเอกสารแนบ โดยให้นักศึกษาที่สนใจสมัครทุน กรอกข้อมูลและเตรียมเอกสารให้ครบถ้วนและส่งมายังวิทยาลัยนานาชาติ ภายในวันจันทร์ ที่ 18 กันยายน 2560 ซึ่งทางวิทยาลัยนานาชาตินวัตกรรมดิจิทัลจะดำเนินการสอบสัมภาษณ์เพื่อตรวจสอบความพร้อมของ นักศึกษาและดำเนินการเสนอชื่อไปยัง Ibaraki University ต่อไป

ทั้งนี้ วิทยาลัยนานาชาตินวัตกรรมดิจิทัลได้มอบหมายให้ นางสาวณัฐริกรานต์ แก้วนิล พนักงานปฏิบัติงานด้านพัฒนาคุณภาพนักศึกษา เป็นผู้ประสานงาน หมายเลขโทรศัพท์ 42606

จึงเรียนเพื่อโปรดพิจารณาให้ความอนุเคราะห์ จักขอบคุณยิ่ง

Radhama Juppang

(ผู้ช่วยศาสตราจารย์ ดร.ปรารถนา ใจผ่อง)

รองคณบดีฝ่ายวิชาการ ปฏิบัติการแทน
 คณบดีวิทยาลัยนานาชาตินวัตกรรมดิจิทัล

August 3, 2017

To whom it may concern,

Tatsuo Sato
Director, Center for Global Education
Ibaraki University

Call for Applications to Ibaraki University Exchange Program for 2018

We are pleased to announce that Ibaraki University is inviting applications for the 2018 Ibaraki University Exchange Program. We are accepting a few full-time undergraduate and/or graduate students from your institution under the student exchange agreement between Ibaraki University and your institution.

If there are any students at your university who are interested in studying at Ibaraki University, please recommend them to apply to the program. The completed application form with other necessary documents indicated in 6 (1) below must be arrived by the due date as specified in 6 (2).

The details are as follows:

1. The number of students to be accepted

Not to exceed the number specified in the agreement

(We will adapt it considering the number of students currently being accepted by Ibaraki University.)

2. Eligibility

Applicants must be full-time undergraduate/graduate students at your institution.

- (1) Students who demonstrate academic excellence and personal integrity
- (2) Students who do not intend to seek a degree at Ibaraki University
- (3) Students who have a definite purpose and plan of study abroad and are expected to obtain benefits through studying in Japan
- (4) Students who, while studying at Ibaraki University, continue to be registered as a full-time student at your university and shall return to your university to continue their studies or to graduate from your university, as soon as they complete the period of studying at Ibaraki University.

3. Period of stay

One academic year or less

※1st semester: April 1st to the middle of August

2nd semester: September 21st to 4th week of February

4. Status of student

Accepted students will have the status of a Special Auditor.

5. Students' arrival date in Japan

Students must arrive in Japan at the beginning of April, 2018 or at the September 21st, 2018

6. Recommendation of applicants

Fill in "Recommendation of the Applicants" (Form 1) and submit it to the Student Exchange Division, Ibaraki University, along with the following documents as listed in (1) by the due date.

- Please do not recommend more applicants than specified by the agreement.
- All the documents must be written in either Japanese or English. Any document in a language other than Japanese or English must be accompanied with a translation into Japanese or English.
- All documents must be completely filled in, with block letters.
- Incomplete or overdue documents cannot be processed.
- All the documents submitted will not be returned.
- During the process, additional documents may be required other than those

~~hereinafter defined.~~

- We will not accept applications directly sent by applicants. We will not answer any questions directly asked by the applicants.

(1) Application documents

1 "Application Form for the Exchange Program" (Form 2) - 1 copy

2 "Certificate of Enrollment of the Applicant for the Exchange Program" (Form 3)
- 1 copy

3 "Study plan in Japan" (Form 4) - 1 copy

4 Certificate of Academic Record - 1 copy

5 Photocopy of Passport - 1 copy (if available)

6 Photograph 3×4cm / 1.2 × 1.5 inch - 3 copies

※Refer to page 11.

7 Certificate of Physical Examination -1 copy※

8 Application for Certificate of Eligibility -1 copy※

9 Certificate of annual income or bank statement for a bank account balance

1 original

a) Certificate of annual income of the supporter: A student financially supported by someone.

※If the supporter doesn't have a job, submit his/her bank account balance instead of the certificate of annual income

b) Certificate of bank account balance of the student: A student pays his/her expenses.

c) Submit the respective certificates: A student corresponds to both a) and b).

※The amount of the bank account balance should be approximately more than 60,000 yen times months of stay in Japan.

10 A letter of financial support 1 original

The letter certifying that financial supporter is paying all of the applicant's expenses while the applicant is studying at Ibaraki University

11 Personal History 1 copy※

※As for 8, 10 and 11, use the designated forms attached.

(2) Deadline

~~Period①(For those who wish to study in Japan from April, 2018 to~~

August, 2018).....October 6th, 2017

Period②(For those who wish to study in Japan from April, 2018 to February,2019).....October 6th, 2017

Period③(For those who wish to study in Japan from September 21st, 2018 to February,2019).....February 28th, 2018

Period④(For those who wish to study in Japan from September 21st, 2018 to August,2019).....February 28th, 2018

7. Ibaraki University International Exchange Project Scholarship

The applicant must be a student from partner institutions under the student exchange agreement with Ibaraki University. After examining submitted documents,

the recipient of the scholarship will be announced. As special measures, the scholarship may be offered preferentially to a student from a partner institution where imbalance in the number of accepted students is found.

Students who are receiving scholarships (except for loans) more than 50,000 JPY per month, however, are not eligible for this scholarship. We will later notify partner universities of the possibility that this scholarship can be granted to their students.

Monthly stipend : ¥40,000 (up to 10 months) ※This is Only for Period ③

8. Tuition fees etc.

Fees are quoted based on the exchange agreement.

If the agreement includes the tuition waiver, the examination fee, the enrollment fee and the tuition will be exempted.

If the agreement does not include the tuition waiver, students must pay the following tuition fee.

	Fees for official examination	Enrollment fee	Tuition fee
Special Auditor			¥14,800(per unit)

Students are required to enroll in a minimum of seven 90-minute classes per week.

9. Living expenses

Average living expenses for international students at Ibaraki University are within the range of ¥50,000 to ¥100,000 per month. (The exact amount of the expenses varies depending on one's choice of housing, etc.)

10. Health insurance

Exchange students must subscribe to the "National Health Insurance". It costs about 2,000 yen per month. Upon joining the National Health Insurance System, a National Health Insurance Certificate will be issued. If s/he shows this to a medical institution at the time of receiving medical treatment, s/he will need to pay only 30% of the incurred medical cost.

Additionally, they are required to purchase the "Personal Accident Insurance for Students Pursuing Education and Research (PAISPER)". However, the range of activities covered under PAISPER is limited. Therefore, we recommend that exchange students buy an insurance for study abroad with a broader coverage.

See further in details "Personal Accident Insurance for Students Pursuing Education and Research": <http://jees.or.jp/gakkensai/index.htm>

11. Housing

Exchange students are given priority for living in a university dormitory. If no room is available, applicants will need to rent a private apartment near the campus (monthly rent costs mostly within the range of ¥30,000 to ¥35,000).

12. Notification of the results of applications

The applicants who wish to arrive in Japan in April will receive the results of the final selection by Ibaraki University between the middle of February and the beginning of March. Those who wish to arrive in Japan in October will receive the results in the end of August. Note that, in some cases, Ibaraki University may not be able to accept all of the applicants.

13. Student visa

Once their eligibilities have been confirmed, we will send you letters of acceptance and the document issued by the Japanese Immigration, called a "Certificate of Eligibility," both of which are needed to apply for a student visa.

A Guide to Japanese Visas (The Ministry of Foreign Affairs of Japan)

Japanese : <http://www.mofa.go.jp/mofaj/toko/visa/index.html>

English : http://www.mofa.go.jp/j_info/visit/visa/index.html

14. Inquiries

~~If you have any questions, please contact us either by email or fax, either in Japanese or English. Please put "your university name - Ibaraki Exchange" on the title line in your email/fax.~~

*** We will not accept applications directly sent by applicants. We will not answer any questions directly asked by the applicants.**

Hiroshi Yasuda

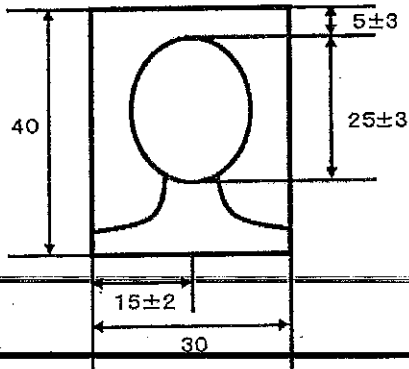
International Exchange Division, Ibaraki University

2-1-1 Bunkyo, Mito, Ibaraki-ken 310-8512, Japan

Telephone : +81-29-228-8056 Fax : +81-29-228-8594

E-mail : hiroshi.yasuda.hr@vc.ibaraki.ac.jp

6 (1) 6 photograph
(unit : millimeter)



1. The photograph of only an applicant
2. The size of the photograph is fixed as above. The size of head is from top of the head(including hair) to the chin
3. Turn to the front with bare head
4. No background or shadow
5. A clear photograph
6. Has to be taken within three months

Write your nationality, name, and the date of your birth.

Useful information

Ibaraki University

<http://www.ibaraki.ac.jp/general-info/index.html>

International Student Center

<http://www.isc.ibaraki.ac.jp/>

JASSO "Student Guide to Japan"

(独) 日本学生支援機構 「日本留学ガイドブック」

http://www.jasso.go.jp/study_j/sgtj.html

受入期間 ③, ④(2018年9月渡日)

Period ③, ④(For those who arrive in Japan in September, 2018)

(様式1)

Form 1

学生交流協定に基づく派遣大学推薦書

Recommendation of the Applicants

茨城大学長 殿

To: President of Ibaraki University

学生交流協定による留学希望者を次のとおり推薦します。

I recommend the following applicants.

順位 Rank	氏名 Name of Applicant	派遣学部・研究科 College/Graduate School	学年 Year of Study	備考 N.B.T.
1位 First				
2位 Second				
3位 Third				
4位 Fourth				
5位 Fifth				

※2018年9月21日時点での所属、学年を記入のこと。

Please fill in the College/Graduate school and Year of study at the date of September 21st, 2018

年 月 日

Date: Year Month Date

国名

Country

入子名

Name of Institution

職名

Title

氏名

Name

署名

Signature

連絡担当者

Contact Person

氏名

name

役職名

title

Eメール

E-mail

部署名

Division

住所

Address

電話/FAX

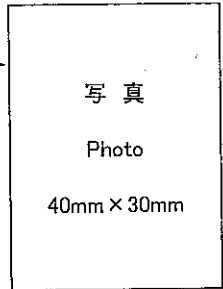
TEL/FAX

Please fill the yellow columns and put the yellow circles on the appropriate terms.

在留資格認定証明書交付申請書

APPLICATION FOR CERTIFICATE OF ELIGIBILITY

To the Director General of 東京 Regional Immigration Bureau



出入国管理及び難民認定法第7条の2の規定に基づき、次のとおり同法第7条第1項第2号に掲げる条件に適合している旨の証明書の交付を申請します。

Pursuant to the provisions of Article 7-2 of the Immigration Control and Refugee Recognition Act, I hereby apply for the certificate showing eligibility for the conditions provided for in 7, Paragraph 1, Item 2 of the said Act.

1 国籍・地域 Nationality/Region 2 生年月日 Date of birth

3 氏名 FAMILY NAME, Given name

4 性別 Sex 5 出生地 Place of birth 6 配偶者の有無 Marital status

7 職業 Occupation 8 本国における居住地 Home town/city

9 日本における連絡先 Address in Japan 10 旅券 Passport

11 入国目的 Purpose of entry: check one of the followings

12 入国予定年月日 Date of entry 13 上陸予定港 Port of entry 14 滞在予定期間 Intended length of stay 15 同伴者の有無 Accompanying persons, if any

16 査証申請予定地 Intended place to apply for visa

17 過去の出入国歴 Past entry into / departure from Japan

18 犯罪を理由とする処分を受けたことの有無 Criminal record (in Japan / overseas)

19 退去強制又は出国命令による出国の有無 Departure by deportation / departure order

20 在日親族(父・母・配偶者・子・兄弟姉妹など)及び同居者 Family in Japan (Father, Mother, Spouse, Son, Daughter, Brother, Sister or others) or co-residents

Table with 7 columns: 続柄, 氏名, 生年月日, 国籍・地域, 同居予定, 勤務先・通学先, 在留カード番号

※ 20については、記載欄が不足する場合は別紙に記入して添付すること。なお、「研修」、「技能実習」に係る申請の場合は記載不要です。

茨城大学外国人留学生健康診断書

Health Certificate of an International Student for Ibaraki University (for special auditor) (特別聴講学生用)

氏名 name	ファミリー (Family)	ファースト (First)	ミドル (Middle)	<input type="checkbox"/> 男 male <input type="checkbox"/> 女 female	現住所 address: 〒zip-code
	自国語 mother tongue				
	ローマ字 English				
カナ表記 Japanese in katakana					
生年月日 date of birth	年 月 日 (満 歳) Y M D (years old)				

(☑check)

視力 eyesight	右 right (corrected)	聴力 audition	右 right
	左 left		左 left

色覚 color discrimination	<input type="checkbox"/> 正常 normal <input type="checkbox"/> 異常 () abnormal	運動機能 障害 dyskinesia	<input type="checkbox"/> 正常 normal <input type="checkbox"/> 異常 () abnormal
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エックス線検査 X-ray diagnosis	撮影方法 method of photographing <input type="checkbox"/> 間接 indirectly <input type="checkbox"/> 直接 directly photograph number 撮影番号: date of photographing 平成 年 月 日撮影 Y M D	主な現在症 present illness	入学後の健康管理上注意すべき疾病の有無とその内容 Express existence or nonexistence and detail of any noteworthy illness on the view of health care in the university.
	所見 none Opinion <input type="checkbox"/> 無 <input type="checkbox"/> 有 yes	既往症 past illness	
	(☐treatment/☐observation is necessary)	特記事項等 special mention	

診断の結果上記のとおり相違ないことを証明する。

I attest above contents based on the results of diagnostics.

平成 年 月 日
date Y M D

address 住所 (所在地) _____
 name of the institute or hospital 医療機関名 _____
 name of the doctor and signature or seal 医師の氏名 _____ (印) seal

【記入上の注意】

- 1) 視力に異常がある場合は、必ず矯正視力を記入してください。
- 2) その他各欄は必ず記入し、所見のない場合でも空欄とせず、なし、斜線等を記入し、記載漏れでないことがわかるようにしてください。記載漏れ場合、再提出していただくことになりますので注意してください。

【NOTES】

- 1) If eyesight is not normal, be sure to fill out the corrected eyesight.
- 2) Please don't leave columns in blank. In order to prevent accidental skip, please fill any word, e.g. none.

経費支弁書

Letter of Financial Support

入国管理局長 殿

To: Director of Immigration Bureau

国籍

Nationality

氏名

Name

生年月日

Date of birth

年

Year

月

Month

日

Day

(男・女)

(Male/Female)

私は、このたび上記のものが日本国に在留中の入国した場合の経費支弁者になりましたので、下記のとおり経費支弁の引き受け経緯を説明するとともに経費支弁について証明します。

I have become a financial supporter of the above applicant during his/her stay in Japan and therefore I would like to explain the reason for support and make the following statement:

1. 経費支弁の引受け経緯 (申請者の経費支弁を引受けた経緯及び申請者との関係について具体的に記載してください。)

Reason for support (Explain the circumstance and the relationship between yourself and the applicant in detail. Also please state that you will be responsible for the financial need)

2. 経費支弁内容

Content of financial support

私 _____ は、上記の者の日本国滞在について、下記のとおり経費支弁することを証明します。

I _____ hereby prove that I will support the above applicant during his/her stay in Japan.

(1) 学費 毎月・半年ごと・年間

Tuition Monthly/Semi-annually/Annually

円

JPY

(2) 生活費 月額

Living expenses Monthly amount

円

JPY

(3) 支弁方法 (送金・振込等支弁方法を具体的に書いてください。)

Method of support (Explain method of remittance, transfer, etc.)

年

Year

月

Month

日

Day

経費支弁者

Supporter:

住所 〒

Address

Tel

E-mail

氏名 (署名)

Name (Signature)

印

学生との関係

Relationship to the applicant