

**2024 Graduate School of Sciences and Technology for Innovation,  
Tokushima University  
Division of Regional Development  
Division of Clinical Psychology  
“ Master Course ”  
Admission Guide for Non-Degree Students**

**1 Summary of System**

This program is for students who seek to take course(s) in Graduate School of Faculty of Integrated Arts and Sciences. At the end of course(s), students are able to achieve credits after passing examination(s). Achieved credits will be certified as Master-level credit in some cases.

**2 Requirements**

Those who have achieved academic standards suitable to complete academic courses.

**3 Application Procedure**

As a general rule, necessary documents must be brought to the Student Affairs office in person.

**(1) Deadline for application**

First Semester

International Applicant without visa: Monday, November 13, 2023 ~ Friday, November 17, 2023

Other applicants: Monday, January 15, 2024 ~ Friday, January 19, 2024

Second Semester

International Applicants without visa: Monday, May 13, 2024 ~ Friday, May 17, 2024

Other applicants: Monday, August 19, 2024 ~ Friday, August 23, 2024

**(2) Place to submit application materials**

Student Affairs Section of Faculty of Integrated Arts and Sciences, Tokushima University

1-1 Minamijosanjima-cho, Tokushima 770-8502

(Refer to ★ "8 Layout drawing")

Telephone: 088-656-7108      skgakumk@tokushima-u.ac.jp

**(3) Application documents**

|                        |                                                                                                                                                                                                                                |
|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Enrollment Application | ① Fill in the application and attach a picture (photographed within 3 months; half of the upper-body, without a cap, the front and sized 4cm × 3cm).<br>② Must receive official stamp of approval from the lecturer in charge. |
| Letter of acceptance   | Submitted by applicants who are employed.                                                                                                                                                                                      |
| Medical Certificate    | Applicants should have a medical checkup within 3 months of applying and should submit an official Medical Certificate that is written and sealed by a doctor.                                                                 |
| Warranty Certificate   | ② Should be handwritten by the applicant.<br>② Unnecessary for international applicants.                                                                                                                                       |
| Promissory Letter      | Should be handwritten by the applicant.                                                                                                                                                                                        |

|                                   |                                                                                                                                                                                                     |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Graduation Certificate            | Applicants should submit a graduation certificate of the last school or institution the applicant graduated from or completed.                                                                      |
| Return Envelope                   | For applicants who apply from Japan, write a postal code, address and name on a return envelope with an 84 yen stamp.                                                                               |
| Examination Fee                   | 9,800yen<br>Pay the examination fee at the Josanjima Accounting Office after applicant has received the confirmation at the Student Affairs Section of the Faculty of Integrated Arts and Sciences. |
| Admission certificate Application | Submitted by applicants who need an admission certificate for visa acquisition.                                                                                                                     |
| Others                            | Applicants should submit any document proving qualification to enroll.                                                                                                                              |

**Note**

- 1) We are not able to accept incomplete documents.
- 2) Any certificates written in languages other than Japanese should have a Japanese translation attached.

#### **4 Month of Entrance**

Enrollment is generally in April and October.

#### **5 Entrance Procedures**

(1) Expense (as of June 1<sup>st</sup>, 2023)

- |                            |            |
|----------------------------|------------|
| ① Entrance Fee             | 28,200 yen |
| ② Tuition Fee (per credit) | 14,800 yen |

(2) Payment Period

- ① Entrance Fee: After admission is permit by the end of March for Semester 1  
by the end of September for Semester 2
- ② Tuition Fee: by end of April for Semester 1  
by end of October for Semester 2

(3) Place of Payment

Josanjima Accounting Office, Tokushima University  
2-1 Minamijosanjima-cho, Tokushima 770-8506

(Refer to ● “8 Layout drawing”)

(4) Payment Method

Generally applicants should pay in cash at the counter.

#### **6 Website of the Faculty of Integrated Arts and Sciences and Graduate School of Integrated Arts and Sciences, Tokushima University**

Syllabuses are available on the University website.

<http://eweb.stud.tokushima-u.ac.jp/Portal/Public/Syllabus/>

#### **7 Note**

- (1) Check detail about course(s) with the lecturer in charge before applying.
- (2) Course schedule may change due to unforeseen circumstances at Tokushima University.
- (3) Any changes will not be accepted after applications are submitted.
- (4) Submit a request of revocation of attendance by the following deadline for cancellation.  
After the deadline, applicants must pay the tuition fee regardless of attendance.  
\* Deadline for cancellation: First semester: Monday, January 29 by 17:00  
Second semester: Monday, September 2 by 17:00
- (5) Examination Fee as noted above is listed as of June 1<sup>st</sup>, 2023 and is subjected to change.

## 8 Layout drawing



- ★ Student Affairs Section, Faculty of Integrated Arts and Sciences
- Josanjima Accounting Office

1. Building No.1, Faculty of Integrated Arts and Sciences
2. Building No.2(West Building), Faculty of Integrated Arts and Sciences
3. Regional Cooperation Plaza
4. Building No.2(East Building), Faculty of Integrated Arts and Sciences
5. Building No.3, Faculty of Integrated Arts and Sciences
6. Liberal Arts and Sciences Building No.4
7. Liberal Arts and Sciences Building No.5 & Health Service, Counseling and Accessibility Center
8. Liberal Arts and Sciences Building No.6 & Center for Community Engagement and Lifelong Learning
9. Student Hall
10. Regional and international Exchange Hall (Glocal Communication Hall) & Center for Community Engagement and Lifelong Learning
11. Cafeteria
12. Gymnasium
13. Music Building
14. Library
15. Building for Department of Civil and Environmental Engineering & Research Center for Management of Disaster and Environment
16. Laboratories for Department of Civil and Environmental Engineering
17. Building for Department of Electrical and Electronic Engineering
18. The Common Lecture Building
19. Innovation Plaza
20. Building for Department of Mechanical Engineering
21. Building for Department of Chemical Science and Technology and Biological Science and Technology
22. Research and Experimentation Laboratories
23. Building for Department of Optical Science and Technology
24. Center for Administration of Information Technology & Building for Graduate School
25. Intelligent Information South Building

26. Intelligent Information North Building
27. Practice Building for Department of Mechanical Engineering
28. Memorial Hall of Alumni(Engineering)
29. Cafeteria
30. Cafeteria
31. Institute of Post-LED Photonics
32. Building Incubation Facilities & Center for Research Administration & Collaboration & Industry-University R&D Startup Leading Institute
33. Venture Business Development Laboratory
34. Cafe Building
35. Extracurricular Activities Building

(別紙第 1 の 3 号様式)  
(Annex Form 1-3)

令和 年度徳島大学科目等履修生入学願書  
((year) Tokushima University Non-Degree Student Student Enrollment Application)

令和 年 月 日  
(Date: )

徳島大学長 殿  
(To the President of Tokushima University)

私は貴学の科目等履修生として入学したいので、許可くださるようお願いします。  
(I hereby apply to enroll at Tokushima University as a Non-Degree Student.)

|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|-------------------|
| ふりがな<br>(Furigana)<br>氏名<br>(Name)                                                                                                                                             | 男・女<br>(Male / Female)<br>年 月 日生<br>(Date of birth)                                                                      |                            | 写真貼付<br>(Attach photo here)<br>(正面・脱帽)<br>(Full face with no hat)<br>縦 4cm×横 3cm<br>(Vertical 4 cm × horizontal 3cm) |                                   |                                 |                   |
| 最終学歴<br>(Highest level of education)                                                                                                                                           | 年 月 (卒業・卒業見込・修了・修了見込)<br>(Date: )<br>(Graduated / Expect to graduate / Completed a course / Expect to complete a course) |                            |                                                                                                                      |                                   |                                 |                   |
| 勤務先<br>(Place of work)                                                                                                                                                         | TEL ( ) -                                                                                                                |                            |                                                                                                                      |                                   |                                 |                   |
| 現住所<br>(Current address)                                                                                                                                                       | 〒<br>(Postcode)<br>TEL ( ) -                                                                                             |                            |                                                                                                                      |                                   |                                 |                   |
| 履修希望学部又は教育部<br>(Faculty where you want to study or department)                                                                                                                 |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
| 在学希望期間<br>(Desired period of study)                                                                                                                                            | 令和 年 月 日 ~ 令和 年 月 日<br>(From (date): to )                                                                                |                            |                                                                                                                      |                                   |                                 |                   |
| 履修希望科目<br>(Subject You want to study)                                                                                                                                          | 授業科目名<br>(Course name)                                                                                                   | 単位数<br>(Number of credits) | 前後期<br>(Semester)                                                                                                    | 曜日・講時<br>(Day of the week / time) | 授業担当教員氏名<br>(Name of the tutor) | 承認印<br>(Approval) |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                                |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |
| 同一年度における他の学部又は教育部での履修の有無 ( 有・無 )<br>Are you taking courses at another faculty or school in the same year? (Yes / No)<br>有の場合は学部名又は教育部名 ( )<br>If Yes, which faculty or school? |                                                                                                                          |                            |                                                                                                                      |                                   |                                 |                   |

※1 願書は志願者本人の自筆で記入してください。(\*1 The applicant should fill in the application themselves.)  
※2 「承認印」欄は、事前に受講が可能であることを授業担当教員に確認の上、押印を依頼してください。  
(\*2 Ask the tutor who has agreed to accept you for their signature in the Approval field.)  
※3 願書は、学部又は教育部ごとに提出してください。(\*3 Submit a separate application for each faculty or school)  
※4 提出された個人情報、入学の選考、学籍管理に関する業務（追跡調査を含む。）のみに使用します。  
(\*4 Personal information will only be used for selection and registration purposes (including tracking studies).)

(別紙第 1 の 3 号様式)  
(Annex Form 1-3)

| 履 歴 事 項 (Personal background) |  |
|-------------------------------|--|
| 学 歴 (Academic background)     |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 職 歴 (Professional background) |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 賞 罰 (Awards and penalties)    |  |

※ 1 学歴は高等学校卒業から記入してください。  
 ただし、外国人出願者は小学校から記入し、大学等で研究生として在学歴がある場合は、その期間も記入してください。  
 (\*1 Fill in your academic background starting with the name of your high school.  
 However, foreign applicants should start with the name of their elementary school and add the period for any time spent as a research student at university.)

※ 2 履歴に虚偽の事項を記入したことが判明した場合は、入学許可を取り消すことがあります。  
 (\*2 If any falsehoods are discovered in the information provided, your admission may be revoked.)

(別紙第 2 号様式)  
(Annex Form 2)

令和 年 月 日  
(Date: )

徳 島 大 学 長 殿  
(To the President of Tokushima University)

所属長  
(Supervisor)

氏 名  
(Name)

印  
(Seal or Signature)

承 諾 書  
(Letter of acceptance)

下記の者が貴学に として入学することを承諾します。  
(I consent to the person named below to attend Tokushima University as  
a )

記  
(Details)

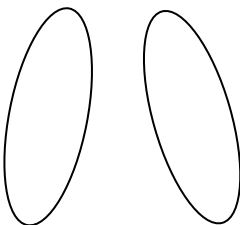
氏 名  
(Name)

所 属  
(Affiliation)

在学期間 令和 年 月 日 ～ 令和 年 月 日  
(From (date): to )

(別紙第 3 号様式)  
(Annex Form 3)

令和 年度徳島大学入学志願者健康診断書  
((year) Tokushima University Applicant Medical Certificate)  
(科目等履修生・研究生)  
(Non-degree student / research student)

|                                                                                                                                                                                                                                                                            |                                                                                                                                          |                                                                                                                                                                                 |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| ふりがな<br>(Furigana)<br>氏 名<br>(Name)                                                                                                                                                                                                                                        | <div>-----</div> <div>男(Male)<br/>女(Female)</div>                                                                                        |                                                                                                                                                                                 |  |
| 生年月日<br>(Date of Birth)                                                                                                                                                                                                                                                    | 年 月 日 生<br>(Date of birth )                                                                                                              |                                                                                                                                                                                 |  |
| 現 住 所<br>(Current address)<br><div>TEL ( ) -</div>                                                                                                                                                                                                                         |                                                                                                                                          |                                                                                                                                                                                 |  |
| 健<br>康<br>の<br>状<br>況<br><br>(State<br>of<br>health)                                                                                                                                                                                                                       | 胸部<br>(Chest)<br><br>間接<br>(Indirect)<br><br>直接<br>(Direct)<br><br>撮影年月日<br>(Date: )<br><br>( 年 月 日)<br>(Date: )<br><br>所見<br>(Findings) | <div></div> <div>その他の疾病<br/>及び異常<br/><br/>(Other<br/>diseases<br/>or<br/>Abnormalities)</div> |  |
|                                                                                                                                                                                                                                                                            |                                                                                                                                          | 医 師 所 見<br>(Medical<br>Findings)                                                                                                                                                |  |
| <div>診断の結果上記のとおり相違ないことを証明する。<br/>(I hereby certify that the above findings are correct.)</div> <div>令和 年 月 日<br/>(Date: )</div> <div>住所(所在地) (Address)</div> <div>医療機関名 (Name of medical institution) TEL ( )</div> <div>医師の氏名 (Name of doctor) 印(Seal or Signature)</div> |                                                                                                                                          |                                                                                                                                                                                 |  |

(別紙第 5 の 2 号様式)  
(Annex Form 5-2)

誓 約 書  
(Promissory letter)

徳 島 大 学 長 殿  
(To the President of Tokushima University)

私 は 貴 学 に 入 学 の う え は ,  
大 学 院 学 則 及 び 諸 規 則 を 守 り ,  
そ の 構 成 員 と し て の 責 務 を 履 行  
す る こ と を 誓 い ま す 。

(On enrolling with Tokushima University , I hereby swear to abide by the regulations of the university and act responsibly as a member of the university.)

令和 年 月 日  
(Date: )

所 属  
(Affiliation)

氏 名  
(Name)

# 入学許可証明書交付願

Admission certificate application

令和 年 月 日  
(Date: )

徳島大学創成科学研究科長 殿

(To the Dean, Graduate School of Sciences and Technology for Innovation,  
Tokushima University)

下記のとおり証明書交付をお願いします。  
(I hereby apply for the certificate as below.)

記

(1) 申請者氏名 (自署) \_\_\_\_\_  
Name of Applicant (signature)

(2) 入学希望者の氏名 <sup>フリガナ</sup> \_\_\_\_\_  
Name of Applicant (with furigana)

(3) 入学希望者の生年月日・性別  
Applicant's date of birth ・ gender  
\_\_\_\_\_ 年 月 日 ・ \_\_\_\_\_  
(year) (month) (day) (gender)

(4) 在籍区分 (○で囲む)  
Section of enrollment (make a mark)  
学部学生 ・ 大学院生 ・ 研究生 ・ 特別聴講学生 ・ 科目等履修生  
Undergraduate ・ Graduate ・ Research ・ Exchange ・ Special Auditing

(5) 発行依頼理由 \_\_\_\_\_  
Reason for applying

(6) 発行部数 \_\_\_\_\_ 部  
Number of issue