**To: The Embassy of Japan in Tanzania**

**P.O. Box 2577, Dar es Salaam, Tanzania**

From:

|  |  |  |
| --- | --- | --- |
| **Surname** | **Given Name** | **Middle Name** |
|  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of Birth** | **Age** | **Mobile Number** | **Email Address** |
|  |  | **(+255)** |  |
| **Physical Address** |
|  |

Circle the degree and field you are applying for (**Please refer the chart in the application guideline**).

|  |  |  |
| --- | --- | --- |
| **(1) UNDERGRADUATE** | **RESEARCH** | **(4) SPECIALIZED TRAINING COLLEGE** |
| **(2) Master** | **(3) PhD** |
| * **Social Sciences and Humanities A**
* **Social Sciences and Humanities B**
* **Natural Sciences A**
* **Natural Sciences B**
* **Natural Sciences C**
 | * **HUMANITIES**
* **SOCIAL SCIENCES**
* **ARTS**
* **SCIENCE**
* **ENGINEERING**
* **AGRICULTURE**
* **MEDICINE**
 | **(A) Technology** **(B) Personal Care and Nutrition** **(C) Education and Welfare** **(D) Business** **(E) Fashion and Home Economics** **(F) Culture and General Education** |

Fill in the blanks below if applicable.

|  |  |
| --- | --- |
| **Form four Div:** ………  | **Bachelor GPA:** …… (out of ……) (minimum requirement: 3.5/5.0 or 7.0/10.0)**Name of the university & course graduated** ……………………………… |
| **Form Six Div:** ……… | **Master GPA:** …… (out of ……) (minimum requirement: 3.5/5.0 or 7.0/10.0)**Name of the university & course graduated** ……………………………… |

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| **Medical condition to be considered during the selection:** ………………………………………………… |