**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:** ………………………………………………… |