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| ２０２２年度  【学部生用】 | |  | | №1 |
|  |  |  | 受付番号 |  |

**松下幸之助記念志財団**

**「松下幸之助国際スカラシップ」奨学金申請書**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | 記入日 | | |  | | | 年 |  | | | | 月 | | | 日 | | |
| フリガナ | |  | | | | | | | | | | | 生年月日  （西暦） | | | |  | | 年 | |  | 月 | | |  | | 日 | | |  | | | | | 顔写真 貼付  4cm×3cm  カラー  （３ヶ月以内に  　　撮影したもの） | | | | | | | | | | | | |
| 氏名 | |  | | | | | | | | | |  |
|  | | | | （年齢 歳） | | | | | | | | |  | | |  |  | | | | | カラー  ３ヶ月以内に  撮影したもの | | | | | | | | | | | | |
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| 現住所 | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | ＴＥＬ： | | | | | | |  | | | | | | ＦＡＸ： | | |  | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | |
| Ｅ－ｍａｉｌアドレス： | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 日本国内連絡先 | | | | | |  | | | | | | | | | ＴＥＬ： | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| （留学時） | | | | | 〒 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | 氏名 | | | | | | | |  | | | | | | | | （（　申請者との関係： | | | | | | | | | | | | | | | | |  | | | | | | | |
| 在籍大学 （留学時の日本の大学名）  指導教官名・肩書 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | 所在地 | | | TEL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 留学時の研究テーマ： | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 渡航先（国名・地域名） | | | | | | | | | |  | | | | | | 留学期間： □ 9ヶ月 ／ □ 1年 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| （西暦 | | | | | | | | | |  | | 年 | |  | | 月 ～ | |  | | | | 年 | | | |  | | | 月） | | |
| 留学先大学名 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
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| 所在地 | | | | TEL: FAX: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 入学（受入）許可証 □ 有 □ 無（提出予定 年　　月） | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | |
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| 英語能力自己評価（A・B・C） | | | | | | | | | | | 読む（　　　　）　書く（　　　　）　話す（　　　　） | | | | | | | | | | | | | | | | | | | | 渡航先国言語の能力・資格 | | | | | | | | | | | | | | | | |
| 資格を  有する  場合 | TOEIC (　　　点） | | | | | | | | | | TOEFL（PBT　点）（CBT　点）（iBT　点） | | | | | | | | | | | | | 英 検　(　 級) | | | | | | |  | | | | | | | | | | | | | | | | |

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|  |  | | №2 |
|  | | 受付番号 |  |

留学計画書

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| 氏名 |  | | | 留学先大学名 | | | | | | | | | |  |
|
| 渡航先（国名･地域名） | |  | | 留学期間　西暦 | |  | 年 |  | 月 ～ |  | 年 |  | 月 | |
| 留学時の研究テーマ （NO.1と同じであることを確認） | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| 研究テーマの説明１ （留学の動機・意義についても記載してください） | | | | | | | | | | | | | | |
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| 研究テーマの説明２ | | | （財団の目指す国際相互理解、あるいは自然と人間との共生との関連について） | | | | | | | | | | | |
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|  |  | | | №3 | | |
|  | | | 受付番号 |  | | |
|  | | |  | | | | |
| 留学計画及び方法 （なぜ渡航先（国・地域）や大学を選んだのかも記載下さい） | | | | | |  | |
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| 留学終了後の進路希望および留学経験の活かし方について | | | | | | |  |
|  | | | | | | |  |
| 特記事項 （何かあれば記載下さい） | | | | | | | |
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|  |  | | №4 |
|  | | 受付番号 |  |

経費計画書

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| 氏名 |  | | 渡航先（国名）：　　　　　　　　機関名： | | | | | | | | |  |
| 留学期間： 2023年　　月　～　　　　年　　　月　（9ヶ月～12ヶ月） | | | | | | | | |
|  | | | | | | | | | | | | |
| 明　　　　　　　　細 千円未満は四捨五入 | | | | | | | | | | | | |
| 円 | | | | 全 期 間 | | | | | | | 内訳・算出根拠など | |
| 滞在費 | | 往復航空運賃 | |  |  |  |  |  |  |  |  | |
| 家賃 | |  |  |  |  |  |  |  |  | |
| 食費 | |  |  |  |  |  |  |  |  | |
| その他生活費 | |  |  |  |  |  |  |  |  | |
| 計 | |  |  |  |  |  |  |  |  | |
| 学費 | | 入学金 | |  |  |  |  |  |  |  |  | |
| 授業料 | |  |  |  |  |  |  |  |  | |
| その他 | |  |  |  |  |  |  |  |  | |
| 計 | |  |  |  |  |  |  |  |  | |
| 研究費 | | 協力者謝金 | |  |  |  |  |  |  |  |  | |
| 旅費交通費 | |  |  |  |  |  |  |  |  | |
| 書籍代 | |  |  |  |  |  |  |  |  | |
| その他 | |  |  |  |  |  |  |  |  | |
| 計 | |  |  |  |  |  |  |  |  | |
| その他 | |  | |  |  |  |  |  |  |  |  | |
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| 計 | |  |  |  |  |  |  |  |  | |
| 合　　　　　計 | | | |  |  |  |  |  |  |  |  | |
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| 渡航先国での生活基盤（居住先、知人等） | | | | | | | | | | | | |
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|  |  | | №5 |
|  | | 受付番号 |  |

自 薦 書

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| 氏名 |  | 所属大学名 |  |
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|  | | |  | | | | №6 | | | | | |
|  | | | | | | 受付番号 |  | | | | | |
|  | | | | | |  |  | 年 |  | 月 |  | 日 |
| 公益財団法人 松下幸之助記念志財団　理事長殿 | | | | | | | | | | | | |
|  | | | | | |  | | | | | | |
|  | | | | 推薦者氏名 |  | | | | | | 印 | |
| 所属機関・肩書 |  | | | | | | | |
| 所属機関・住所 |  | | | | | | | |
|
| **推　　薦　　書** | | | | | | | | | | | | |
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| 貴財団に「松下幸之助国際スカラシップ」奨学金を申請しております 下記の者の留学につき次の通り推薦いたします。 | | | | | | | | | | | | |
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|  |  | | | | | | | | | | | |
| 奨学金申請者 氏名 |  | | | | | | | | |  | |
|  | | | | | | | | | |  | |
| 留学目的／  研究テーマ |  | | | | | | | | |  | |
|  | | | | | | | | | |  | |
| 推薦理由 |  | | | | | | | | | | |
|  | | | | | | | | | | | |

以　　上

* 英文推薦書の場合、別様式も可とします。（但し1枚に収めて下さい）