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No.F.13/69/2004-PMU
 Government of India
 Ministry of Finance
 Department of Economic Affairs
 (PMU & Trg. Division)



New Delhi, the 5th July, 2004.

TRAINING CIRCULAR

Subject: Long Term Training Course – Graduate School of Asia-Pacific Studies of Waseda University - M.A. Programme in International Relations in Cooperation with JICA from 1st March, 2005 to 31st March 2007.

The Government of Japan have offered the above noted training course. The information booklet containing details of the training is enclosed. The Government of Japan will provide round-trip air fare, accommodation allowance and the living allowance. Except otherwise admissible under the extant rules, the organisation sending the nomination is not supposed to pay any amount on account of DATA/Contingencies etc. while stay of their officer in Japan.

- 2 The number of slot available to India is two. The number of nominations to be sent to this Department may not, therefore, exceed two regular and one reserve.
- 3 The nomination of suitable candidates, following the Department's guidelines issued on 5.4.2004 should reach this Department not later than 28.7.2004 through proper channel alongwith the following documents:

- (i) ANNEXURE I: DEA's PRESCRIBED PROFORMA (ONE COPY)
- (ii) APPLICATION FORM : FOUR (4) COPIES (PHOTOGRAPHS DULY AFFIXED ON EACH FORM)
- (iii) Nomination Form A2A3 together with Medical History Questionnaire;
- (iv) Country Report;
- (v) Other Documents such as Filled in questionnaire, Comparative Study Statement etc. as indicated in the JICA's Information Booklet.

12 JUL 2004

P.S.G.A.D.

JSLR

*1. via air mail
 via post only
 computerized only*

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 2004

(2)

-2-

4. The nomination received after the deadline specified in paragraph 3 above will not be considered at all.
5. The circular inviting application for the training course is also available on this Department's Website: www.finmin.nic.in.


(Samir Kumar)
Deputy Director (PMU & Trg.)
Tele: 23092229

1. Ms. Bandana Banerjee, Desk Officer, Department of Personnel & Training, New Delhi.
2. All State Governments (Deptt. of Personnel).

Copy to:

Technical Director (NIC) with the request to put it on the Ministry of Finance site under Long Term Courses in Japan.

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JICA Long-Term Training Program -General Information-

Japanese Fiscal Year	2004
Target Field	Governance
Training Theme	Assistance to the Development of Administrative System (Development Plan)

University	Waseda University
Department	Graduate School of Asia-Pacific Studies
Course Title	MA Program in International Relations
Degree	MA in International Relations

Objective

The mission of the Graduate School of Asia-Pacific Studies is to examine and to analyze the vibrant Asia-Pacific regions from many view points. The ultimate aim is to educate specialists who eventually contribute to the region.

Outline of the Course

This MA Program is aimed at education for young leaders who engage in administration for development aid, and formulation of development policies in target countries. The aim of this course is to allow young leaders to receive high education in Japan and establish human-networks, so that they will contribute such experiences to the development of their countries.

JICA Long-Term Training Program -General Information-

Required Documents

1. Application Form (designated form)
2. Applicant Evaluation Form (designated form)
3. Official college/university certificate
 - a. Graduation Certificate
 - b. Official transcripts of courses
4. Proof of language proficiency
5. Proof of Payment of Application Fee *Prepared by JICA Tokyo
6. Physical Examination Certificate (designated form)
7. Address Label (designated form) *Prepared by JICA Tokyo
8. Essay (part 1)
9. Essay (part 2)
10. Letter of consent from employer
11. GRE score report (not compulsory)
12. Statement of source of funds (designated form)
*Keep other parts blank but SIGNATURE
13. Submit three photograph (3cm x 4cm) with your name on backside

Closing Date

2004/08/13

*All required documents must be submitted to JICA Centers/Branches by this date.

JICA Domestic Center

JICA Tokyo

Contact Information (Inquiry)

Ken INOUE / Nakako Ishimaru
 JICA Tokyo International Centre (JICA Tokyo)
 Second Programme Division
 Address: 2-49-5 Nishihara, Shibuya-ku, Tokyo, Japan
 Phone: 03-3485-7017 Fax: 03-3485-9206

Others

2004年 6月 8日 19時57分

JICA 国内事業部

No. 2332

16/34

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15/34

受験番号: _____
Application No. Office use only

早稲田大学大学院アジア太平洋研究科
2004年度 修士課程・専門職課程・博士後期課程 入学願書
2004 Application Form for MA/MBA/MOT/PhD Programs
Graduate School of Asia-Pacific Studies, Waseda University

◆出願分類 Application Category

国際関係学専攻修士課程
MA Program in Int'l Relations

国際関係学専攻博士後期課程
PhD Program in Int'l Studies

経営管理プログラム
MBA Program

技術経営プログラム
MOT Program

◆出願方法 Application Method

国内出願: Domestic Application

国外出願: Foreign Application

◆学位論文・第2次選考の使用言語 Choice of Language for Thesis/ 2nd Screening

日本語: Japanese

英語: English

I. 志願者 Applicant

氏名(漢字): _____
Name in Kanji, if any 姓 (Family) 名 (Given) (Middle)

氏名(英字): _____
Name in Alphabet 姓 (Family) 名 (Given) (Middle)

氏名(かな): _____
Name in Katakana (or pronunciation of your name) 姓 (Family) 名 (Given) (Middle)

性別: Sex 男: Male 女: Female

国籍: _____ 生年月日: 19____年____月____日 年齢: _____歳
Nationality Date of Birth Year Month Day Age

A. 現住所: _____
Address for Correspondence

郵便番号: _____ 電話(自宅): _____ 電話(携帯): _____
Postal Code Home Telephone Cellular or mobile Telephone

ファクス: _____ E-mail: _____
Facsimile

B. 住所(実家): _____
Permanent Home Address

郵便番号: _____ 電話(自宅): _____ ファクス: _____
Postal Code Home Telephone Facsimile

カラー写真
Color Photograph
写真裏面に氏名記入
Print your name
on the opposite side
of the photograph

II. 志望プログラム・研究内容 Intended Program/Research

◆国際関係学専攻 修士課程 MA Program in International Relations

◆入学時期 Period of Admission
 2004年4月 April 2004 2004年9月 September 2004

A. 研究領域 Research Field (「授業科目一覧」参照 Please see 'Academic Courses')
 地域研究 Area Studies
 国際関係研究 International Relations Studies
 国際社会研究 International Community Studies

B. 研究対象地域 Research Area
 日本 Japan 東アジア East Asia 東南アジア South East Asia
 西・南アジア West/South Asia 大洋州地域 Oceania 米州地域 America

C. プロジェクト研究 Project Research
 プロジェクト研究は入学選考時に本研究科アドミッションズ・オフィスが決定し、第1クォーターからスタートします。未定の場合は空欄のままでも結構です。
 Your project research will be decided at the time of entrance evaluation. The project research will start from the first quarter. You can leave the column blank if you have not decided yet.

第1志望: _____ 教員名: _____
 First Choice Name of Project Advisor

第2志望: _____ 教員名: _____
 Second Choice Name of Project Advisor

*入学後、一定条件のもとプロジェクト研究の変更申請は可能です。
 Please note that you may request a change of project research after matriculation at GSAPS upon approval.

◆国際関係学専攻 博士後期課程 PhD Program in International Studies

◆入学時期 Period of Admission
 2004年4月 April 2004 2004年9月 September 2004

A. 研究領域 Research Field
 国際関係学 International Relations 歴史学 History 人類学 Anthropology
 政治学 Politics 経済学 Economics 商学・経営学 Commerce/Management
 法学 Law 社会学 Sociology 教育学 Education その他 Others

B. 研究対象地域 Research Area
 日本 Japan 東アジア East Asia 東南アジア South East Asia
 西・南アジア West/South Asia 大洋州地域 Oceania 米州地域 America

C. 志望プロジェクト研究指導 Project Research Guidance
 カタログの中から希願するプロジェクト研究指導を1つ選択してください。
 You must indicate the intended project research guidance from the list in the catalogue.

プロジェクト研究指導名: _____ 担当教員名: _____
 Name of Project Research Guidance Name of Project Advisor

D. 所属学会 Academic Society
 有: 学会名: _____
 Name of the Academic Society
 無 None

◆経営管理プログラム(MBA Program)・技術経営プログラム(MOT Program)

A. プログラム情報 Program Information

志望プログラムを一つ選択 (☑) してください。
Please check only one box.

1. 日本語によるプログラム MBA Program/MOT Program offered in Japanese

経営管理プログラム (ストラテジック・マネジメント専修・アントレプレナーシップ・マネジメント専修)

2004年4月入学 2年制コース 1年制コース
2004年9月入学 2年制コース

技術経営プログラム (テクノロジー・マネジメント専修)

2004年4月入学 2年制コース 1年制コース

2. 英語によるプログラム MBA Program/MOT Program offered in English

MBA Program (Strategic Management Track/ Entrepreneurship Management Track)
September 2004 admission 2-year program

B. プロジェクト研究 Project Research

1. 経営管理プログラム2年制コース:

プロジェクト研究または志望専修名を記入してください。未定の場合は空欄で結構です。

2. その他のプログラム: プロジェクト研究名を必ず記入してください。

3. 2-year MBA program in English:

Please fill in your intended project research topic or track. You can leave the column blank if you have not decided yet.

第1志望:
First Choice

教員名:
Name of Project Advisor

第2志望:
Second Choice

教員名:
Name of Project Advisor

III. 学 歴 Educational Background

- ・小学校を含む、通学したすべての学校を年代順に記入してください。
List, in chronological order, all schools attended starting from primary school.
- ・大学・大学院については、学部・研究科名を明記し、卒科・専攻名等も記入してください。
As for higher education, state details such as 'undergraduate' / 'graduate' and 'department' / 'major'.

学校名/学部 School/ Department/ Major	学校所在地(国・都市) Location of School(City/Country)	在学期間 Period of Attendance	学位(含む見込み) Degree obtained or expected
_____	_____	year month year month	_____
_____	_____	year month year month	_____
_____	_____	year month year month	_____
_____	_____	year month year month	_____
_____	_____	year month year month	_____
_____	_____	year month year month	_____

通算在学期間: _____ 年 _____ か月
Total Period of Education: _____ years _____ months

IV. 実務経歴 Professional Background

- A. これまでの実務経歴を年代順にすべて記入してください。ただし、パート・アルバイトを除く。
Please list all full-time positions in chronological order.

勤務先・団体名 Company/Organization Name in full	勤務期間(年/月) Begin - End (month & year)	職務・職位 Job Title	所在地(国・都市) City/ Country of Work	年収(任意回答) Gross Annual Salary(optional)
_____	____ - ____	_____	_____	_____
_____	____ - ____	_____	_____	_____
_____	____ - ____	_____	_____	_____
_____	____ - ____	_____	_____	_____
_____	____ - ____	_____	_____	_____

通算勤務期間: _____ 年 _____ か月
Total Period of Professional Experience: _____ years _____ months

B. 現職/最近の職歴について記入してください。 Most Recent Full-time Position

企業・団体名: _____
 Company or Organization

所在地: _____
 Address

電話: _____ ファックス: _____
 Telephone Facsimile

業種: _____ 社員・職員数: _____
 Industry Number of Employees

現職位: _____ 部署名: _____
 Current Job Title Department

現所属職任時期: _____ 企業・団体への就職時期: _____
 Date of Appointment to Present Position Date of Joining Present Organization

初任給(任意回答): _____ 現在の年収(任意回答): _____
 Starting Gross Annual Salary (optional) Present Gross Annual Salary (optional)

貴方の勤務先に連絡を取ってもいいですか。
 May we contact your current employer?

はい(連絡先を下記に記入) You (Whom may we contact?) いいえ No

姓 Family Name _____ 名 First Name _____

職位 Title _____ 直通電話番号 Direct Telephones _____

C. 貴方の担当業務に関する詳細(職務、職責、部下、予算額、業績など)をA4用紙に記入し、添付してください。(1,000字以内)

On a separate sheet of A4 sized paper, please give a detailed description of your job, including nature of work, major responsibilities, employees under your supervision, size of budget, and results achieved. (400 words)

V. 日本語学習歴および能力 Learning Period and Proficiency in Japanese Language

日本語が母語の方は記入の必要がありません。 Not necessary if Japanese is your mother language.

学習期間 Period of Study	教育機関 School Attended	学習期間 Period of Study	教育機関 School Attended
year month year month	_____	year month year month	_____
year month year month	_____	year month year month	_____
読解力: (Reading)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
会話力: (Speaking)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
筆記力: (Writing)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
聴解力: (Listening)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)

日本語能力試験(1級) Level 1 of the 'Japanese Language Proficiency Test'

*必ず証明書を添付してください。 Certificate must accompany.

受験日 (Test date) _____ 成績 (Score) _____
 year month day

V. 英語学習履歴および能力 Learning Period and Proficiency in English Language

英語が母語の方は記入の必要がありません。Not necessary if English is your mother language.

学習期間 Period of Study	教育機関 School Attended	学習期間 Period of Study	教育機関 School Attended
_____	_____	_____	_____
year month year month		year month year month	
_____	_____	_____	_____
year month year month		year month year month	
読解力: (Reading)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
会話力: (Speaking)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
筆記力: (Writing)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)
聴解力: (Listening)	<input type="checkbox"/> 優 (Excellent)	<input type="checkbox"/> 良 (Good)	<input type="checkbox"/> 可 (Fair)

英語能力を示す検定試験・資格等

Standardized tests and/or qualifications which prove your English proficiency.

*必ず証明書を送付してください。Certificate must accompany.

テスト名等:	受験日:	成績等	テスト名等:	受験日:	成績等
Name of Test, etc.	Test Date	Score (if any)	Name of Test, etc.	Test Date	Score (if any)
_____	_____	_____	_____	_____	_____
	year month day			year month day	

VI. 日本語および英語以外の外国語学習履歴 Foreign Languages other than Japanese and English

言語名: Language	学習期間 Period of Study	教育機関 School Attended	検定試験・資格等 Standardized Tests/ Qualification
_____	_____	_____	_____
	year month year month		
_____	_____	_____	_____
	year month year month		

VII. GMAT, GRE, その他資格試験等 GMAT, GRE or other qualifications

*該当者のみ (if applicable)

*必ず証明書を添付してください。Certificate must accompany.

テスト名等: Name of Test	受験年月: Test Date	スコア等 Score (if any)
_____	_____	_____
	year month	
_____	_____	_____
	year month	

VIII. 社会活動およびボランティア活動履歴 Social and/or Volunteer Activities

活動内容: Description of Activity	所属先・団体名 Company/ Organization/ or Employer	所在地(国・都市名) Location (City/ Country)	活動期間 Period of Activity
_____	_____	_____	_____
			year month year month

X. 志願者評価者 Evaluator 1

氏名 _____
 Name in full 姓 (Family) 名 (Given)

役職 _____
 Title

所属機関 (学校・会社等) _____
 Institution (School/Company)

現住所 _____
 Present Address

電話 (自宅) _____
 Home Telephone

電話 (職場) _____
 Work Telephone

志願者との関係 _____
 Relationship to Applicant

志願者評価者 Evaluator 2

* 国外出願者のみ Applicants under Foreign application only

氏名 _____
 Name in full 姓 (Family) 名 (Given)

役職 _____
 Title

所属機関 (学校・会社等) _____
 Institution (School/Company)

現住所 _____
 Present Address

電話 (自宅) _____
 Home Telephone

電話 (職場) _____
 Work Telephone

志願者との関係 _____
 Relationship to Applicant

外国人志願者のみ記入 For International Students only

1. 在留資格 Visa Status

有 I have a valid Japanese visa. 無 I do not have a visa.

在留資格 Visa Status _____ 月 (months)

在留期間有効期限 Date of Visa Expiration _____ 年 _____ 月 _____ 日
 Year Month Day

2. 日本における緊急連絡先 Emergency Contact Person in Japan

有 The following person 無 None

氏名: _____ 志願者との関係: _____
 Name in full 姓 (Family) 名 (Given) (Middle) Relationship to Applicant

職業 (該当する場合): _____
 Occupation (if applicable)

現住所: _____
 Present Address

電話 (自宅): _____ 電話 (職場): _____
 Home Telephone Work Telephone

本入学願書および他の出願書類に記入された内容に相違ないこと、エッセイは私自身で作成したこと、また、入学が許可された場合には早稲田大学の規則に従うことを誓約いたします。

I certify that all the information provided on this application form and in the accompanying documents is complete and accurate, and that the essays are written by myself, and, if admitted, I agree to comply with the rules and regulations of Waseda University.

日付: _____ 年 _____ 月 _____ 日
 Date Year Month Day

署名/捺印: _____ 印
 Signature/Seal

<参考用 For statistical purposes only>

*この項目は入学選考の対象外です。 This item is not a part of the entrance screening.

A. 本大学院を最初に知ったきっかけを教えてください。
How did you first hear about our graduate school?

B. 本大学院への出願を決定する際に決め手となった主な情報源を教えてください。複数回答可。
Which source(s) of information most influenced your decision to apply GSAPS, Waseda University.

- 1 アジア太平洋研究科ホームページ
GSAPS Website
- 2 入試要項・カタログ
Admissions Guide/ Catalog
- 3 インターネットバナー：サイト名 _____
Banner Advertisement on the Internet
- 4 インターネットメールニュース 掲載時期 _____年 _____月
Internet mail news
- 5 新聞・雑誌記事：媒体名 _____ 掲載時期 _____年 _____月
Newspaper/ Magazine Article
- 6 新聞・雑誌広告：媒体名 _____ 掲載時期 _____年 _____月
Newspaper/ Magazine Advertisement
- 7 ポスター：どこで見ましたか？ _____
Poster Where did you see it?
- 8 GSAPSオープンスクール・セミナー
GSAPS Open School / seminar
- 9 Embark.com ホームページ
Embark.com Website
- 10 在学生
Current Students
- 11 修了生
Graduates
- 12 教員
Faculty Members
- 13 オフィス・スタッフ
Office Staff
- 14 その他 _____
Other

C. 出願中の、または出願を検討している他大学院があれば教えてください。
Please list any other graduate schools which you are currently applying to, or thinking of applying to.

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14
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エッセイ [パート1]
Essays [Part 1]

早稲田大学大学院アジア太平洋研究科
Graduate School of Asia-Pacific Studies
Waseda University

※修士課程・専門職課程応募者用
For MBA/MOT/MA Programs Applicants

氏名: _____
Name in full 姓 (Family) 名 (Given) (Middle)

以下のエッセイ 1, 2, 3 を提出してください。回答は A4 用紙にタイプまたはワープロで作成し、本紙と共にホッチキスでとめて提出してください。全てのページにエッセイ番号および氏名を記入すること。エッセイ 4 は希望者のみ回答してください。回答は志願者本人が行ってください。他者により作成されたことが認められる場合は、合格・入学を取り消します。
Essay topics 1, 2, and 3 listed below must be answered. Use separate sheets of A4 sized paper and staple them together with this page as a cover. Your answer should be typed and double-spaced. Clearly indicate essay number and your name on each page. Essay 4 is optional. Your essays should be written entirely by yourself. An offer of admission will be withdrawn if it is discovered that you received any assistance.

1. 本大学院における貴方の研究計画をテーマ、アプローチ方法などに言及した上で具体的に述べてください。(1,000字以内)
Please describe in detail the research plan which you wish to pursue at GSAPS, including the theme, approach, and methods, etc. which you intend to use. (400 words)
2. あなたの人生のこの時期に本研究科の修士課程へ出願した理由は何ですか？ (500字以内)
Please explain the reasons why you have chosen to apply to the GSAPS MBA/MA Program at this particular time in your life. (200 words)
3. あなたのキャリアゴールを具体的に設定してください。それをどのように達成しますか、本大学院の修士号がその中でどのような意味を持ちますか。(600字以内)
Please describe your career goals in detail. How do you plan to achieve them? What significance will your experience at GSAPS have in helping to achieve your career goals? (200 words)
4. (回答は希望者のみ)
卒業・進学・地域社会等において賞与されたことなどこの願書の中に記述されなかったものを挙げてください。また、アドミッションズ・オフィスに送付してほしい意欲のある業績を挙げ、その理由を述べてください。(800字以内)
(Optional)
Please describe any special awards which you have received for academic, professional, or community achievements which have not been described elsewhere in this application. Or, please describe some personal achievement which you would like to bring to the attention of the Admissions Office, and state the reasons why the achievement you have described is of particular significance to you. (200 words)

エッセイ [Part 2]
Essays [Part 2]

早稲田大学大学院アジア太平洋研究科
Graduate School of Asia-Pacific Studies
Waseda University

*修士課程・専門職課程国外出願者用

For MBA/MOT/MA Programs Applicants under Foreign Applications only

氏名: _____
Name in full 姓 (Family) 名 (Given) (Middle)

志願する専攻毎に設定された下記のテーマから1つを選択し、小論文形式で自分の意見をまとめてください。日本語で作成する場合は2,000字以内、英語で作成する場合は800語以内とします。回答はA4用紙にマイブまたはワープロで作成し、本誌と共にホッチキスでとめて提出してください。全てのページに選択したエッセイ番号、氏名および希望プログラムを記入すること、回答は志願者本人が行ってください。他者により作成されたことが認められる場合は、入学を取り消します。

Please choose one of the following topics and write a short essay summarizing your opinion in 2,000 characters or less if in Japanese, or 800 words or less if in English. Use separate sheets of A4 sized paper and staple them together with this page as a cover. Your answer should be typed and double-spaced, indicate the selected essay number, your name and the program you are applying for on each page. Your essays should be written entirely by yourself. An offer of admission will be withdrawn if it is discovered that you received any assistance.

[国際関係学専攻 MA Program in International Relations]

1. アジア太平洋地域の民主化における世論の役割
The role of public decentralization in "Globalization" in the Asia-Pacific region
2. アジア太平洋地域における所得分配と貧困問題の関係
Discuss the relationship between income distribution and poverty in the Asia-Pacific region
3. アジア太平洋地域における人口問題
Discuss the population problems and trends of the Asia-Pacific region
4. アジア太平洋地域における国際通貨基金及び世界銀行の役割
The role of IMF and The World Bank in the Asia-Pacific region

[経営管理プログラム・技術経営プログラム MBA Program/MOT Program]

5. 早稲田大学ビジネススクールで学んだことを今後のあなたのキャリアでどう活かすか
How you will utilize your learning at Waseda Business School in your future career
6. あなたの国の人材をモティベートする主な要因
Major factors that contribute to improvement of motivation of the people in your country
7. あなたの過去のキャリアで達成した三つの主要な業績
Three major accomplishments in your past career
8. グローバル化があなたの国の企業に及ぼしている影響
Impact of "Globalization" on the companies in your country

◆エッセイ番号 Essay #

[Empty box for writing the essay number]

志願者評価書
Applicant Evaluation Form

早稲田大学大学院アジア太平洋研究科
Graduate School of Asia-Pacific Studies
Waseda University

氏名: _____
Name in full 姓 (Family) 名 (Given) (Middle)

評価者の方へ

この屋上記志願者より、評価者として貴方のお名前を頂きました。つきましては当該志願者の学力、人柄および特記すべき事項に関してご意見を承りたくよろしくお願い申し上げます。なお、志願者評価書には本用紙をご使用いただき、両封の封筒に入れ封印またはご署名のうえ、志願者本人に速やかにご返却いただきますようお願いいたします。志願者は未開封の封筒を願書と共に当大学院へ提出します。志願者が出願期間内に書類を提出できますよう、よろしくご協力の程お願い申し上げます。

アドミッションズ・オフィス

To the Evaluator

The person named above has applied to our graduate school and has given your name as an evaluator. Please evaluate this candidate's academic ability, personal traits, and other relevant information. Please use this form for your reference and return it directly to the candidate, sealed in the enclosed envelope, and signed across the seal. The candidate will forward the application form together with the envelope with the reference sealed therein to the graduate school, in order to allow the candidate to submit a complete application within the application period, your assistance is sincerely appreciated. Your evaluation will be held in strictest confidentiality by our office.

Admissions Office

◆他の一般的な学生との比較において、本志願者をどのように評価されますか?
How does the applicant compare in the following areas with other students in general?

	非常に優秀 Truly Exceptional Top 5%	優秀 Excellent Top 10%	とても良い Very Good Top 25%	良い Good Middle 50%	平均以下 Below Average Lower 25%	評価不可能 Unable to Judge
学力 Academic ability						
分析力 Analytical ability						
独創性・創造性 Originality/Creativity						
柔軟性 Flexibility						
口頭表現能力 Ability in oral expression						
文章表現能力 Ability in written expression						
協調性 Ability to work with others						
指導力 Leadership						

裏面へ続く Please continue on the reverse side.

志願者評価書
Applicant Evaluation Form

◆志願者の資質・才能などについて特記すべき事項があれば、具体的に記述してください。
Please describe the applicant's special personal qualities and/or abilities.

評価者氏名： _____
Evaluator's Name in full 姓 (Family) 名 (Given) (Middle)

志願者との関係： _____
Relationship to Applicant

役職： _____
Title

所属機関(学校・会社等)： _____
Institution (School/Company)

住所： _____
Present Address

電話： _____
Telephone

ファックス： _____
Facsimile

日付： _____ 年 _____ 月 _____ 日
Date Year Month Day

署名/捺印： _____ 印
Signature/Seal

(18)
17
28/34

志願者評価表
Applicant Evaluation Form

早稲田大学大学院アジア太平洋研究科
Graduate School of Asia-Pacific Studies
Waseda University

氏名: _____
Name in full 姓 (Family) 名 (Given) (Middle)

評価者の方へ

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Admissions Office

◆他の一般的な学生との比較において、本志願者をどのように評価されますか？

How does the applicant compare in the following areas with other students in general?

	非常に優秀 Truly Exceptional Top 5%	優秀 Excellent Top 10%	とても良い Very Good Top 25%	良い Good Middle 50%	平均以下 Below Average Lower 25%	評価不可能 Unable to Judge
学力 Academic ability						
分析力 Analytical ability						
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柔軟性 Flexibility						
口頭表現能力 Ability in oral expression						
文章表現能力 Ability in written expression						
協調性 Ability to work with others						
指導力 Leadership						

裏面へ続く Please continue on the reverse side.

健康診断書
Physical Examination Certificate

早稲田大学大学院アジア太平洋研究科
Graduate School of Asia-Pacific Studies
Waseda University

志願者氏名: _____
Applicant's Name in full 姓(Family) 名(Given) (Middle)

生年月日: _____ 年 _____ 月 _____ 日 性別: 男 女
Date of birth Year Month Day Sex Male Female

現住所: _____
Present Address

1. 身長: _____ cm 体重: _____ kg
Height Weight

視力: 右 _____ 左 _____ 矯正視力: 右 _____ 左 _____
Eyesight Right Left With glasses Right Left

色覚: _____
Color sense 具体的な症状があれば記述してください。Please describe the condition in detail.

聴力: _____
Hearing 具体的な症状があれば記述してください。Please describe the condition in detail.

2. 結核およびその他の疾病等について、診断結果を記述してください。
Please describe in detail any disease, including chronic ones that are found.

3. 所見: この志願者の健康状態は以下のとおりです。
In my opinion the general state of the applicant's health is:
優 Excellent 良 Good 可 Fair 不可 Poor

医療機関名: _____
Hospital/Clinic

所在地: _____
Address

医師名: _____
Physician's Name 姓(Family) 名(Given) (Middle)

診断日: _____ 年 _____ 月 _____ 日 署名/捺印: _____ 印
Date of Examination Year Month Day Physician's Signature/Seal

留学にかかる経費負担計画書
Statement of Source of Funds

早稲田大学大学院アジア太平洋研究科
 Graduate School of Asia-Pacific Studies
 Waseda University

志願者氏名： _____
 Applicant's Name in full 姓(Family) 名(Given) (Middle)

あなたが早稲田大学に留学する間(2年制コースは2年分、1年制コースは1年分)の総費用の支出元と金額を明記してください。

Please indicate below the sources and the amount of funding for your enrollment period in Waseda University.

支出元 Sources of Support	金額(単位：円) Amount (in Japanese yen)
個人貯蓄 Personal savings	¥ _____
両親または親戚 Parent or sponsor (関係： Please specify the relation: _____)	¥ _____
政府またはその他財団 Government/ sponsoring agency (名称： The name of your sponsor: _____) *奨学金受給証明書のコピーを提出してください。 *Please submit a photocopy of scholarship award letter.	¥ _____
その他Others (詳細： Please specify in detail: _____)	¥ _____
TOTAL:	¥ _____

上記に示しました内容に相違ないことを誓約いたします。

I hereby certify that all information on this statement is true and accurate and that the stated funds are available for my educational expenses at Waseda University.

志願者署名 _____
 Applicant's signature

日付 _____ 年 _____ 月 _____ 日
 Date Year Month Day

私費外国人留学生宿舎入居希望アンケート (修士課程のみ)

Housing Questionnaire for Privately-financed International Students (MA/MBA/MOT applicants only)

- * 研究料で提供される宿舎を希望する場合のみ提出してください。
Please submit this form only if you wish to apply for GSAPB-arranged housing.
- * 宿舎の数に限りがあり、全ての希望者に宿舎を割り当てられるわけではないのでご了承ください。
Please note that availability of housing is limited, and we may not be able to accommodate all applicants.

記入上の注意 Instructions:

1. 日本語または英語で記入してください。 This form must be written in either Japanese or English.
2. 黒インクまたは黒のボールペンで記入してください。 You must write in black ink or use a black ball point pen.
3. 申込書に虚偽の申請があった場合には入居を取り消しますので、正確に記入してください。
In cases where there is false information in this form, an offer of housing will be withdrawn.
4. 該当欄の□に✓を記入してください。 Check the appropriate boxes.

1 氏名(漢字) Name in Kanji, if any: _____
 氏名(英字) Name in Alphabet: _____
 氏名(カタカナ) Name in Katakana: _____
 (or pronunciation of your name)

現住所 Address: _____
 Tel: _____ Fax: _____
 E-mail: _____

性別 Sex: 男 Male 女 Female
 国籍 Nationality: _____ 生年月日 Date of Birth: _____

2 出願分類 Application Category
 国際関係学専攻修士課程 MA Program in Int'l Relations
 経営管理プログラム・技術経営プログラム MBA Program/MOT Program

3 希望する宿舎形態にチェックしてください。
 Please mark your desired type of accommodation.
 単身 Single 夫婦 Married Couple 家族(計 _____ 名) Family (total _____ people)

通学時間 Commuting Time
 30分以内 Within 30 minutes 1時間以内 Within 1 hour 1時間以上でも可 Over 1 hour possible

家賃月額 Monthly Rent
 _____円以内が好ましい。
 An amount within ¥ _____ is agreeable.

4 宗教や健康上の食事制限はありますか
 Do you have any dietary restrictions due to religion or health?
 有り Yes _____
 なし No _____

No.1/13/03-PMU
Government of India
Ministry of Finance
Department of Economic Affairs
(PMU & Training Division)

New Delhi April 5, 2004

OFFICE MEMORANDUM

Subject: Foreign training courses administered by the Department of Economic Affairs

With a view to further streamlining and rationalizing the nominations for foreign training programmes being administered by Department of Economic Affairs, the following guidelines are issued.

1. State Governments may submit their nominations directly to DEA subject to the condition that the nomination should have been approved by the designated competent authority in the State Government. Nominations from Central Ministries/Departments should also be approved by the designated competent authority in the Ministry/Department. Officials nominated should actually be working in the area to which the course relates. PSUs and Autonomous Undertakings of Government should send nominations through the concerned Central Ministries/State Governments. In case there is more than one nomination for a particular course, the nominating State Government/Central Ministries should clearly indicate the prioritization of the nominees. Sending of piecemeal nominations may please be avoided.

2. Central Ministries/Dep'ts./State Governments are responsible for ensuring the necessary clearances such as political clearance from MEA, FCRA clearance from MHA, cadre clearance from cadre controlling authority etc. These clearances may be obtained after the candidate is finally selected for the course and before he proceeds on foreign training. However vigilance clearance may be conveyed at the time of sending the nomination to DEA. Nominating State Governments and Central Ministries are informed that in case an officer does not file his/her nominations papers after being duly nominated, he/she would be debarred from any foreign training programme for five years.

3. Nominating State Governments/ Central Ministries should ensure that following instructions of DoPT (with the modification in minimum service and upper age limit indicated below) on foreign training are duly adhered to:-

Duration of Long Term and Short Term Programmes:

- (i) Training programmes abroad of a duration of six months or more are treated as Long Term;
- (ii) Training programmes abroad of a duration of 15 days or more but less than six months are treated as Short Term.

Minimum Service:

Officers should have completed a minimum of 9 years of service on the date of commencement of particular programme; However, in case a foreign Government or university prescribes a different minimum service that would be accepted.

Upper age limit:

Generally for Long Term courses the upper age limit followed is 45 years and for Short Term courses, 52 years at the time of commencement of programme. However, in case where foreign Government/institution prescribes a different upper age limit for a training programme, the same will prevail.

Only one Long Term Programme:

An officer can attend only one long-term training programme in his/her service career.

'Cooling-off' condition:

- (i) An officer having attended a foreign training programme of a duration of 15 days to one month will be required to complete a 'cooling off' period of two years before such an officer can be considered again for foreign training;
- (ii) Officers deputed for training abroad of a duration of more than one month and upto six months are required to complete a 'cooling off' period of three years;
- (iii) Officers deputed for training programmes abroad of a duration of more than six months are required to complete a 'cooling off' period of five years before being considered for a short term programme;
- (iv) The 'cooling off' condition will not apply for training programmes of a duration of less than 15 days;
- (v) Project-related training/official visits abroad, irrespective of duration, are exempted from the provisions of 'cooling off'.

Nomination of SC/ST and Women officers:

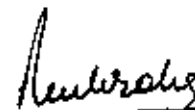
Names of suitable officers belonging to SC/ST as well as women officers for training abroad may also be forwarded in sufficient numbers so that due representation can be given to them.

Officers serving under Central Staffing Scheme:

(i) Only such officers who would have completed a minimum of 2 years of service on the post in GOI at the time of nomination, should be recommended for long term training programmes abroad;

(ii) The officers whose tenure under the Central Staffing Scheme is due to come to an end within two months prior to the commencement of the training, or during the currency of the training, should be nominated by the respective Ministries/Departments of Government of India only after securing the cadre clearance of the respective State Governments/cadre controlling authorities on whose strength the officers are borne. In the event of nomination and final selection of such officers for foreign training programmes, the Ministries/Departments would be required to send a formal proposal for extending the Central Deputation tenure of the officers approved for nomination for training, upto the end of the training, to the Establishment Officer for obtaining the approval of the competent authority so that they could draw their salary from the Central Government during the period of training. On return from training, such officers would revert to their cadre and the Central Ministries/Departments shall not grant any leave in their cases;

(iii) in case of officers whose tenure is due to come to an end more than two months before the commencement of the training programme, the Ministry/Department may sponsor such officers only with the concurrence of the cadre controlling authority concerned. On selection such officers would revert to their Cadre and thereafter proceed on training.



(Vivek Mehrotra)
Joint Secretary

To

1. Secretaries of all the Central Ministries/Departments
2. Chief Secretaries of all State Governments

Copy to:

1. Secretary (Department of Personnel) of all State Governments
2. Joint Secretary (Admn./IC) of all the Central Ministries/Departments
3. All Joint Secretaries in DEA

DEA PROFORMA FOR FOREIGN TRAINING

1. Name:
2. Date of Birth:
3. Educational Qualifications:
 - (i) Academic
 - (ii) Technical
4. Contact Nos:
 - (i) Phone number (with STD Code):
 - (ii) Fax number (with STD Code):
5. (i) Service to which officer belongs:
- (ii) Year of appointment/allotment:
- (iii) Present post:
- (iv) Date from which the current post held:
- (v) Details of previous posts held:
- (vi) Details of the posts held which are relevant to the course
6. Relevance of the course to the candidate:
7. Papers etc. published by the candidate:
(Please attach separate sheet, if necessary)
8. List of training courses attended abroad:

S. No.	Dates & Duration of training	Subject/title of training	Name of the training Institution	Source of funding

9. List of training courses attended in India:

S. No.	Dates & Duration of training	Subject/title of training	Name of the training Institution	Source of funding

Date:
Place:

Signature of the Candidate

10. Shri/Smt.-----is cleared/not cleared from Vigilance angle.

Countersigned

Signature of the designated competent authority
(with office stamp)

Date:
Place: