Japan-Canada Academic Consortium Exchange Program

INSTRUCTIONS: APPLICATION AND PERMISSION TO PARTICIPATE FORM

This form must be completed and included along with all exchange student application materials to the Japan-Canada Academic Consortium (JACAC) member institution through which you are applying for the JACAC exchange program. Complete application packages for exchange students must be sent directly to the JACAC exchange program administrator responsible for administering the exchange at your institution.

Completed application packages for FALL and/or WINTER admission 2020/21 must be sent from the home institution to the Prince Takamado Japan Centre by 10 January 2020.

JACAC Exchange Program Application Package Checklist:

Completed JACAC Exchange Program Student Application and Permission to Participate Form.

An official transcript of all post-secondary work completed and/or presently being taken by the student at the home university.

Copy of valid passport particulars.

Documentation as required to demonstrate Japanese language ability (*where applicable*)

Please ensure that the exchange application is signed by:

Academic Advisor of the student

JACAC Exchange Program Administrator at home university

Designated Japanese language assessor (*where applicable*)

Notes:

- No application fee is required to process this application.
- This form is limited to students applying ONLY for the JACAC Exchange Program through a Canadian JACAC member institution.
- Students wishing to enroll in courses or programs with specific language requirements must ensure they meet the requirements prior to application.
- Exchange applications with incomplete forms or missing documents will lead to delays in processing.

Japan-Canada Academic Consortium Exchange Program
Application Form

APPLICATION AND PERMISSION TO PARTICIPATE FORM

Please refer to the attached instructions. An Exchange Student is one who is admitted to a participating Japanese University who is a member of the Japan-Canada Academic Consortium Exchange Program. This form is to be used as both an application and a permission to participate form for Canadian students. Procedures and definitions are listed on the attached instructions. All sections of this form MUST be completed. Upon receipt of a complete application package, eligibility will be determined and forwarded to the Canadian JACAC Secretariat for approval. Failure to submit all required documentation will lead to delays in processing, and where applicable may lead to student ineligibility.

PERSONAL INFORMATION AND MAILING ADDRESS

Last name _____   First Name _____

Middle Name _____   Former Name (if applicable) _____

Birthdate (MM/DD/YYYY) _____   Birth Place (Country, City) _____

MALE   FEMALE   Country of Citizenship _____

Address _____

City _____   Province _____

Country _____   Postal Code _____

Home Phone Number _____   Permanent email _____

Home Institution _____   Year of Study _____ Cumulative GPA _____

Faculty (Home Institution) _____   Major (Home Institution) _____

EMERGENCY CONTACT INFORMATION

Name _____   Relationship to Student _____

Address _____   City/Town _____

Province/State _____   Postal Code _____   Country _____

Home Phone Number _____   Permanent Email _____

Japan-Canada Academic Consortium Exchange Program
Application Form

APPLICATION AND PERMISSION TO PARTICIPATE FORM

PREFERRED EXCHANGE DESTINATIONS

Please select your preferred Host Institution and program (where applicable). It is required that you select three different institutions, ranked in order of most preferred. Host Institutions must be Japanese Universities participating in the JACAC Exchange Program. A summary participating universities and programs can be found on our site at http://www.jacac.com/what-we-do/student-exchange/student-exchange-partners/

Selection 1	**Selection 2**	**Selection 3**
University	University	University
_____	_____	_____
Program	Program	Program
_____	_____	_____
Exchange Term & Year	Exchange Term & Year	Exchange Term & Year
Academic Year	Academic Year	Academic Year
Fall Term Only	Fall Term Only	Fall Term Only
Winter Term Only	Winter Term Only	Winter Term Only

HOME INSTITUTION JACAC EXCHANGE OFFICER APPROVAL
This student has been selected for nomination to participate in the JACAC Exchange Program.

Name _____ Position _____

Signature _____ Date _____

JAPANESE LANGUAGE PROFICIENCY (*where applicable*)
I certify that this student possesses sufficient Japanese language skill to participate successfully in the academic program of his or her selections in this application.

Name _____ Position _____

Signature _____ Date _____

DECLARATION OF APPLICANT

I certify that all statements and documents in this application are true and complete. I understand that any misrepresentation may result in cancellation of my application, academic discipline and/or legal consequences.

Name _____ Date _____ Signature _____