



APPLICATION FOR ADMISSION TO PhD PROGRAM

(September 2017 Enrollment)

Please type or print legibly.

Paste a color photograph of you taken within the past 3 months.

(4.5cm x 3.5cm)

Department applied (choose one)					
() Computer Science	() Informati		tion and Communication Engineering		
() Mathematical Informatics	() Mechano-		o-Informatics		
() Information Physics and Co	omputing () Creative Informatics				
Name of professor you wish to be	your prosp	ective supe	ervisor		
General Information					
Name:					
family name	first name		middle name	Chinese characters	
Date of birth (Month/Day/Year):	Age:		(as of 1 September 2017) () Mr. () Ms.	
Nationality:	Place of Birth (city):		Marital status: () Single () Married		
Present Mailing Address					
Address:					
E-mail address:				(valid until)	
Phone number:		(valid until)		
Fax number:	(valid until)				
Permanent address, if different					
Address:					
Phone number:	Phone number: Fax number:				
Occupation or Current status with	name of u	niversity/e	mployer		
Fields or research topics of your in	nterests				
<u>(1)</u>					
(2)					

Please attach detailed Research Plan in PhD program at the Graduate School of Information Science and Technology, UT (A4-size sheet; about 10 pages). Your name and page number should be written at the upper right on each page.