

## 提交材料对照表

姓名： \_\_\_\_\_ 出生日期： \_\_\_\_\_  
 电话号码： \_\_\_\_\_ 提交日期： \_\_\_\_\_  
 志愿专业： \_\_\_\_\_ 志愿大学： \_\_\_\_\_

No	提交材料	原件或公证件		复印件		备注
		要求数量	提交数量	要求数量	提交数量	
1	本对照表	1				
2	JDS 中国申请材料	1		2		电脑输入完成。 单面复印。 *请在所有页面右下角签名（汉字、拼音均可）。
3	关于中日关系的随笔	1				*请在所有页面右下角签名（汉字、拼音均可）。
4	学位证明及成绩单	1		2		大学开具的原件或公证件，均需要中英文或中 学位证：学校开具的学位证明需要学校盖章。 （中英文版 or 中日文版各一份） 如只能开中文学位证明，可自行翻译后 让学校盖章。 成绩单：学校开具的成绩单需要学校盖章。 （中英文版 or 中日文版各一份） 如成绩不分学年，请在 JDS 网站下载理 由书模板。 注意：如果想提交学位证/成绩单的公证件，请尽 早准备。
5	推荐信	1				
6	有效语言考试成绩单	1		2		
7	调查问卷	1				
8	身份证明复印件	1				身份证正反面；护照照片页。
9	照片 (4cm x 3cm)	3				请贴好后提交。
10	体检报告					2017 年 6 月 12 日~2018 年 1 月 29 日之间进行的 体检报告（提交中文报告时，需要附上英译或 日译文）

所有提交材料要求为 A4 纸大小。（大学出具的证明除外）

提交的材料请按照上表的顺序整理。

请勿将提交材料打孔、装订。

体检报告于专业面试时提交。

**JAPAN HUMAN RESOURCE DEVELOPMENT SCHOLARSHIP  
FOR CHINESE YOUNG LEADERS (JDS China) 2017**  
**APPLICATION FORM for MASTER LEVEL ENGLISH-MEDIUM COURSE**  
**(This application form should be typed in English)**

**1. Choice of Study**

(1) Please refer to the Application Guidelines for the details in accomplishing this form. Select the field of study and accepting university of your choice, by ticking the corresponding box. If you mark more than one box, your application will become invalid.

Field of Study	Name of University	Graduate School	Years	Choice
<b>Law</b>	Nagoya University	Graduate School of Law (GSL)	2	
	Ritsumeikan University	Graduate School of International Relations	2	
<b>Public Policy</b>	International Christian University	Graduate School of Arts and Sciences	2	
	Ritsumeikan Asia Pacific University	Graduate School of Asia Pacific Studies	1	
	University of Tsukuba	Graduate School of Humanities and Social Sciences	1.5	
	The University of Tokyo	Graduate School of Public Policy	2	
	Sophia University	Graduate School of Global Environmental Studies (GENV)	2	

必须是证件照，  
洗出来粘贴在处。

**2. Personal Information**

Attach your recent  
photograph here  
(Should be taken  
within three months)

Please write your  
name on the back of  
the photo

(4cm×3cm)

(1) Full Name (as of written in passport)  
Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Full Name (Chinese): \_\_\_\_\_

(2) Date of Birth: (day) \_\_\_\_\_ / (month) \_\_\_\_\_ / (year) \_\_\_\_\_

(3) Age: \_\_\_\_\_ (as of application) \_\_\_\_\_ **(as of April 1, 2018)**

(4) Sex: [ ] M / [ ] F

(5) Marital Status: [ ] Single / [ ] Married

请填写截至到 2018  
年4月1日的年龄。

(6) Current Home Address: \_\_\_\_\_

Current Home Address (Chinese): \_\_\_\_\_ Zip Code: \_\_\_\_\_

(7) Current Postal Address: \_\_\_\_\_

Current Postal Address (Chinese): \_\_\_\_\_ Zip Code: \_\_\_\_\_

手签名字(中文 or 拼音都可以) 每一页都要签

Signature of Applicant: \_\_\_\_\_

(8) Phone (Home): \_\_\_\_\_ (9)Phone (Work Place): \_\_\_\_\_

(10)Mobile Phone: \_\_\_\_\_

**\*If you do not have phone at home:**

Contact Person (Family or Relative): \_\_\_\_\_ Phone Number: \_\_\_\_\_

如果是在职期间取得的学历，请标注。

(11)E-MAIL Address: \_\_\_\_\_

中英文填写

请按学位证明填写

### 3. Educational Background

#### (1) Educational Background

Level	Name of School Department (Fill out the form in English and Chinese)	Location	Period of schooling you have attended	From /To (Month/Year)	Degree	Remark
(Ex.)	XXX University Faculty of XXX XXX 大学 XXX 学部/学院	Beijing	4 Years	09/1999 - 06/2003	Bachelor of XXX	self-taught exams
Primary School						
Junior Middle School						
Senior Middle School						
Higher Education						
Others ( )						

中英文填写。(请根据学位证明填写)

注意：如毕业校已改名称，请提交证明学校更改名称的文件。(可从学校网站下载，并翻译成英文 or 日文。同材料一起提交中英版 or 中日版。需本人签字)

全日制学校。(在职学历年数不要计算在内)

Total School Year: \_\_\_\_\_ year(s)

**\*Do not list short-term training courses/. For the incomplete degree study, please mark as 'incomplete**

(\* If you have learned through adult education or self-taught exam, please indicate that in remarks column.)

(2) Have you ever been awarded any scholarship studying abroad?

[ ] Yes Name of the Scholarship: \_\_\_\_\_

Country you studied: \_\_\_\_\_ Duration From (month/year) \_\_\_\_\_ - To (month/year) \_\_\_\_\_

Obtained Degree: \_\_\_\_\_

[ ] No

Signature of Applicant: \_\_\_\_\_

(3) Are you currently applying for another scholarship?

Yes Name of the Scholarship: \_\_\_\_\_

No

(4) Have you ever applied for JDS Programme before?

Yes Study field, university, year you applied\* : \_\_\_\_\_

(\* List all, if more than one.)

No

(5) Have your family members or relatives currently or ever been awarded JDS scholarship?

Yes relationship, university, year he/she awarded\* : \_\_\_\_\_

(\* List all, if more than one.)

No

要用中文和英文填写。  
要写全称，不要简写。

**4. Work Experience**

(1) Work Experience \*Fill out from the most recent full-time job/ work.

<b>(Fill out the form in English and Chinese)</b>					
<b>Organization / Company</b>	<b>Department</b>	<b>Job Title (Refer to your business card)</b>	<b>Period of Employment</b>	<b>From /To (Month/Year)</b>	<b>**Type</b>
(Ex.) Ministry of XXXX XXXX 部	XXXX Division XXXX 司/科	Senior Officer 主任科員	3 years 2 months	07/2003 - 08/2006	A

\*\*For the type of organization above, choose the applicable alphabet below:

- A. Ministry/Governmental agency (Central or Local)    B. Institution    C. State Corp/State Co.
- D. Research Institution/ Center (State)    E. Educational Institution (State)
- F. Research Institution/ Center (Private)    G. Educational Institution (Private)
- H. Private Corp./Co    I. International Org. / NGO/NPO    J. Self-Employment
- K. Other (please specify): \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

实际工作年数的总和。这里要具体到\*年\*月

Total Work Year: \_\_\_\_\_ year(s) \_\_\_\_\_ month(s) (Side Job, part-time Job are not included)

Do you have any military service record? [  ] Yes / [  ] No

(2) Your Current Occupation (including title): \_\_\_\_\_

Your Current Occupation (including title)(Chinese): \_\_\_\_\_

**-Do not abbreviate the name of the organization nor of the department-**

(3) Name of the current Governmental Organization: \_\_\_\_\_

Name of the current Governmental Organization (Chinese): \_\_\_\_\_

(4) Name of the current Department of the Governmental Organization: \_\_\_\_\_

Name of the current Department of the Governmental Organization (Chinese) : \_\_\_\_\_

(5) Work Place Address: \_\_\_\_\_

Work Place Address (Chinese): \_\_\_\_\_ Zip Code: \_\_\_\_\_

(6) Work Place Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**※ If you are on loan now, please write the name of your original Governmental Organization.**

(7) Name of the Original Organization: \_\_\_\_\_

Name of the Original Organization (Chinese): \_\_\_\_\_

(8) Original Work Place Address: \_\_\_\_\_

Original Work Place Address (Chinese): \_\_\_\_\_ Zip Code: \_\_\_\_\_

(9) Original Work Place Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

如有外派、挂职等情况，请填写。

Signature of Applicant: \_\_\_\_\_

**5. Describe the responsibilities of your work.**

Your answer must be typed in 150 words or less. If necessary, use separate sheet of A4 sized paper and attach this page as a cover. [Maximum 1 (one) page]

**\* Do not forget to write your name and signature on the bottom of each page of the attachments.**

**(Current Work)**

**(Previous Work)**

Signature of Applicant: \_\_\_\_\_

- 6. Upon returning home, how do you expect to utilize your knowledge, skills and experiences obtained through study in Japan in your efforts to contribute to the development of your country.**

Your answer must be typed in 400-500 words [Maximum 2 (two) pages]. If necessary, use separate sheet of A4 sized paper and attach them to this page as a cover.

**\* Do not forget to write your name and signature on the bottom of each page of the attachments.**

Signature of Applicant: \_\_\_\_\_

## 7. Research Plan

7-1 Choose your subject from “Common Agenda”

请按 JDS 官网的【研究方向】抄写。

\*The Common Agenda for each study field is the guideline for writing your research proposal, and decided by the JDS Operating Committee (the representatives of the Government of China and the Government of Japan). Refer to <http://www.jdschina.org> for details.

7-2 Write the title of your research plan in line with the Common Agenda you have chosen above.

On separate sheets of A4 sized paper, please write a brief outline of your proposed Master’s degree thesis. It should describe the subject you wish to study and the questions you wish to address in your thesis or research paper. It is desirable that the research you will undertake addresses important problems and policy issues for the development of your country. Describe how your study can contribute to find the solutions to these issues.

The research plan must be typed, and **should be no more than 700 words [Maximum 3 (three) pages.]** If you have an alternative plan, you may add a short (less than 300 words) summary for that.

### NOTE:

- 1) The research plan/s must be inserted between this and the next pages.
- 2) Do not forget your name and signature on the bottom of each page of the attachments.

Signature of Applicant: \_\_\_\_\_



## 8. Declaration

此处电脑填写

I, (print your full name) \_\_\_\_\_, declare that I will apply for Japan Human Resource Development Scholarship for Chinese Young Leaders (JDS China) Program fully understanding “Applicants Guidelines for JDS China Program”, especially the articles stipulated below:

1. All the information provided in this Application Form by me is true and accurate to the best of my knowledge and ability. My application may be nullified if any information mentioned above is found to be false.
2. Application Form which is incomplete or missing necessary documentation, will not be accepted.
3. All the selection process and the decision are entirely entrusted to the secretariat of JDS China and any inquiries or objections by applicants regarding the result of the selection shall not be permitted.
4. If any act of dishonesty is found other than those above in the application and selection process, I shall not lodge any complaint about cancellation of the application resulting from such act.
5. I will not decline the scholarship after passing the examination.
6. The objective of the JDS China is to provide Chinese citizens to study in Japan at the master’s degree level in order to support national efforts to achieve social and economic development in China. Thus, the returned fellow is under the obligation to contribute to the development of China and to remain there at least for two years after completing the degree course in Japan.
7. I agree that my personal information in the Application Form, provided to Japan International Cooperation Center (JICE), shall be used exclusively for the purpose of the operation of JDS China programme.

此处手签

Signature: \_\_\_\_\_

(\*Please sign at the bottom of all the pages including this page)

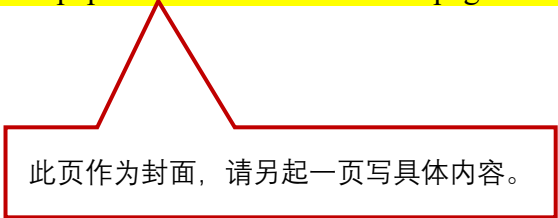
Date: (day) \_\_\_\_\_ / (month) \_\_\_\_\_ / (year) \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

## 9. Essay about Japan-China relationship

**Considering a choice of your study field, how would you contribute to promote Japan-China relationship after returning home?**

(Your answer must be typed in 300-400 words [Maximum 2 (two) pages] **Use separate sheet of A4 sized paper and attach them to this page as a cover.** Each separate sheet must be signed .)



此页作为封面，请另起一页写具体内容。

Signature of Applicant: \_\_\_\_\_

## 注意:

本推荐信需要用英语或者日语电脑填写。  
只有最后的签名和日期需要领导手签。

Authorized officer of ministry concerned  
所属機関上司用

完成后要放入信封、封好。封口处需要领导签字。

Development Scholarship for Chinese Young Leaders  
(JDS China) 2017

2017年度 中国若手行政等長期育成支援事業 (JDS 中国)

## CONFIDENTIAL STATEMENT of REFERENCE for MASTER LEVEL

修士課程応募者のための推薦状

This reference statement is to be completed by the employer / authorized officer from the ministry/institution etc. (or the former employer or other appropriate person, if you are employed). This should be written or typed clearly in English or Japanese and put in a sealed envelope (if not in English nor Japanese, an accurate translation must be attached by the referee).

この推薦状は応募者の所属先の上司が記入するものです。英語または日本語で記入し、封筒に入れ割印または署名の上、封印をして下さい (英語または日本語以外で記入した場合は英語訳または日本語訳を添付して下さい)。

The Name of the Applicant and the Desired Study Field (this should be written by the applicant by him/herself):

応募者の氏名及び希望分野 (この項目は応募者自身が記入すること)

Family Name 姓

Given Name 名

Applied Study Field 希望分野: \_\_\_\_\_

To the referee: This is an integral part of an application form for the scholarship project provided by the Government of Japan. This particular project offers young Chinese administrative officers opportunities to study in Japanese universities (for a master's degree). They are expected to play a role in the development of their home country, and also to contribute to the promotion of mutual understanding, cooperation and exchange between China and Japan at the governmental level after returning to China. Your candid responses to the items below would greatly assist the selection. Please return the form in the sealed envelope to the applicant.

推薦者の方へ: この推薦状は日本政府が実施する奨学プログラムの応募書類の一つです。この奨学プログラムは日本の大学 (修士課程) で研究する機会を提供しており、留学生は、帰国後にそれぞれの研究分野において自国の発展に貢献すること、そして日中両国の相互理解の促進と政府レベルの交流協力に貢献することが期待されています。応募者についてのあなたの率直な評価が選考での判断材料となります。本推薦状は封筒に入れ割印または署名の上封印し、応募者本人に返却して下さい。

### 1. How long have you known the applicant and in what context?

あなたは応募者のことを、どのくらいの期間、また、どのような関係で知っていますか?

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### 2. How do you estimate the applicant's personality?

あなたは応募者の性格をどのように評価しますか?

(Strength 長所)

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(Weakness 短所)

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## 3. How do you describe the applicant's competence and weakness in his/her area of study or work?

あなたは応募者の研究分野における適性と弱点をどのように評価しますか？

(Competence 適正)

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(Weakness 弱点)

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## 4. How do you appraise the applicant's ability that he/she will fill upon his/her return to China, and the duties he/ she will undertake?

あなたは応募者が中国に帰国後に発揮すると思われる能力、または担当すると思われる職務についてどのように評価しますか？

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## 5. Please evaluate the applicant regarding the following items in comparison with other staffs: Please tick one each.

職場の他の職員と比較して、応募者をどのように評価しますか？当てはまる欄をチェックして下さい。

	Excellent	Good	Average	Below Average
Academic Ability 学力				
Knowledge of Specialty Field 専門分野についての知識				
Motivation & Diligence 熱意及び勤勉さ				
Potential for Future Contribution in Specialty Field 志望分野における将来の貢献度				
Leadership 指導力				
Emotional Maturity 感情面の成熟度				
Communication Skill コミュニケーション能力				
Skill in Maintaining Personal Relationship with others 協調性				
Adaptability to New Environment 新しい環境への適応力				

6. Other recommendation remarks その他推薦事項

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7. Relevance of the applicant's research plan and his/her current work; (please tick one from below)

応募者の研究計画と現在の職務内容との関連性 (下記のうち該当する1つにチェックをつけてください)

- Strongly relevant 関連性が高い /  somewhat relevant 比較的関連している /  not relevant 関連が無い

Comments コメント:

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推荐领导的名字

Family Name 姓

Given Name 名

Name 推薦者氏名 : \_\_\_\_\_

Name of Ministry, Institution etc. and Department 所属先・部署名 : \_\_\_\_\_

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Title 役職 : \_\_\_\_\_

Relationship to the Applicant 応募者との関係性: \_\_\_\_\_

Phone No. 電話: \_\_\_\_\_ Mobile No. 携帯電話: \_\_\_\_\_ Fax No. ファックス: \_\_\_\_\_

Signature 署名 : \_\_\_\_\_

Date 記入日: (day 日) / (month 月) / (year 年) \_\_\_\_\_

必须领导手签

〈推荐书翻译文件\* 请勿在此表格上填写〉

### 所属机关用

## 中国年轻行政人员长期培养支援项目（JDS 中国）2017 硕士课程申请人的推荐信

本推荐信由申请人所属机关领导或工作上司，用英文或日文填写，并在封口处签名或盖上封口印。（如果用英文或日文以外的文字填写，请添加英文或日文的翻译）。

申请人的姓名及希望专业（此项目由申请人本人填写）

姓\_\_\_\_\_名\_\_\_\_\_

希望专业：\_\_\_\_\_

致各位推荐者：本推荐信是由日本国政府实施的奖学金项目的申请材料之一。本奖学金项目向合格人员提供在日本的大学（硕士课程）研究的机会。项目期待留学生归国后，为本国的发展、促进中日两国人民的相互理解以及两国政府间的交流合作做出贡献。您对于申请人的客观评价将作为选拔的判断材料。请在封口处签名或盖上封口印后返送给本人。

1. 您与申请人认识有多长时间，与申请人是什么关系？
2. 您怎样评价申请人的性格？（优点·缺点）
3. 您认为申请人是否具备在他所申报领域的研究能力以及有何不足之处。
4. 您认为申请人学成回国后，能从事什么样的工作，能发挥什么样的作用？
5. 与其他的同事相比，您怎样评价申请人？请将您的评价在下表勾画。

	优秀	良好	普通	平均以下
学习能力				
专业知识				
热情及勤奋度				
在希望的领域里的潜力				
指导能力				
心里素质				
交流能力				
协调性				
对新环境的适应能力				

6. 其他推荐事项：
7. 研究计划和目前的工作关联性：非常高·比较高·无关联

推荐者姓名：\_\_\_\_\_

工作单位·部门名称：\_\_\_\_\_

职务：\_\_\_\_\_ 申请人员和推荐人关系：\_\_\_\_\_

电话：\_\_\_\_\_ 手机：\_\_\_\_\_ 传真：\_\_\_\_\_

签名：\_\_\_\_\_

日期：（日日）（月月）（年年）\_\_\_\_\_

## 信息来源调查表

姓名: \_\_\_\_\_

以下提问的目的是为了使「JDS 中国」项目更加完善，不会用在其他地方。  
大家的回答也不会影响选考结果。

### 1. 什么时候知道这个项目的？

\_\_\_\_\_年\_\_\_\_月\_\_\_\_日

### 2. 是如何知道 JDS 中国项目的？（请选择一项）

- ①通过有关部门（单位）负责人
- ②收到有关部门（单位）通知
- ③上司
- ④JDS 归国生
- ⑤项目宣传册
- ⑥其他: \_\_\_\_\_

### 3. 各个省、单位内部有没有针对如何报名 JDS 中国项目进行说明？

- 有
- 没有

**感谢您的合作！**

请医生用英文或日文填写

如果医生无法填写外语，请  
报名人员代替填写，并提交  
体检报告原件及本翻译件。

注意：必须是专业体检机构  
或三甲医院

JDS 中国 健康診断書 2017

STATE OF HEALTH (to be completed by the examining physician)

と。  
or English.

男 Male 生年月日 年齢  
女 Female Date of Birth: / / Age:  
Month Day Year

姓 name Middle name

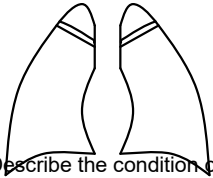
体 重  
Height \_\_\_\_\_ cm Weight \_\_\_\_\_ kg

(2) 血 圧 Blood pressure \_\_\_\_\_ mm/Hg ~ \_\_\_\_\_ mm/Hg 血液型 Blood Type A B O RH +- 脈拍 /分 整 Regular 不整 Irregular  
Pulse \_\_\_\_\_ /min

(3) 視 力 Eyesight: (R) \_\_\_\_\_ (L) \_\_\_\_\_ (R) \_\_\_\_\_ (L) \_\_\_\_\_ 色覚異常の有無 正常 Normal  
裸眼 without glasses 矯正 with glasses or contact lenses Color Blindness 異常 Impaired

(4) 聴 力 正常 Normal 言語 正常 Normal  
Hearing: 低下 Impaired Speech: 異常 Impaired

2. 申請者の胸部について、聴診と X線検査の結果を記入してください。X線検査の日付も記入すること。(6ヶ月以上前の検査は無効)  
Please describe the results of physical and X-ray examinations of applicant's chest X-ray (X-ray taken more than 6 months prior to the certification is NOT valid).



肺 正常 Normal Date \_\_\_\_\_  
Lung: 異常 Impaired Film No. \_\_\_\_\_

心臓 正常 Normal  
Cardiomegaly: 異常 Impaired

心電図 正常 Normal  
Electrocardiograph: 異常 Impaired

Describe the condition of applicant's lung. \_\_\_\_\_

3. 現在治療中の病気 Yes (Disease: \_\_\_\_\_)  
Disease Treated at Present No

4. 既往症  
Past history: Please indicate with + or - and fill in the date of recovery  
Tuberculosis..... ( . . ) Malaria..... ( . . ) Other communicable disease..... ( . . )  
Epilepsy..... ( . . ) Kidney Disease..... ( . . ) Heart Disease..... ( . . )  
Diabetes..... ( . . ) Drug Allergy..... ( . . ) Functional Disorder in extremities..... ( . . )  
Rheumatic Fever  ( . . ) Psychosis..... ( . . )

5. 検 査 Laboratory Tests  
検 尿 Urinalysis: Glucose ( ), Protein ( ), Occult Blood ( )  
貧血 Anemia   
赤沈 ESR: \_\_\_\_\_ mm/Hr, WBC count: \_\_\_\_\_ /cmm, Hemoglobin: \_\_\_\_\_ gm/dl, GPT: \_\_\_\_\_

6. 診断医の印象を述べてください。Please describe your impression.  No need for re-checkup  Need for re-checkup ( \_\_\_\_\_ )

7. 志願者の既往歴、診察・検査の結果から判断して、現在の健康状態は十分に留学に耐えうるものと思われませんか？  
In view of the applicant's history and the above findings, is it your observation his/her health status is adequate to pursue studies in Japan?  
Yes  No   
Yes, but with the following Condition/s/Need/s to be met in Japan   
 1) medication (medicine's name: \_\_\_\_\_ dose/frequency: \_\_\_\_\_ );  
 2) re-checkup or regular checkup (what kind of check: \_\_\_\_\_ frequency: \_\_\_\_\_ );  
 3) any particular remarks on his/her daily life ( \_\_\_\_\_ ); or  
 4) others (e.g. self- treatment: \_\_\_\_\_ )

日付 \_\_\_\_\_ 署名 \_\_\_\_\_  
Date: \_\_\_\_\_ Signature: \_\_\_\_\_

医 師 氏 名 \_\_\_\_\_  
Physician's Name in Print: \_\_\_\_\_

検査施設名 \_\_\_\_\_ 所在地 \_\_\_\_\_  
Office/Institution: \_\_\_\_\_ Address: \_\_\_\_\_