



Knowledge Co-Creation Program under Technical Cooperation with the Government of Japan

Application Form for the JICA Knowledge Co-Creation Program

Application must be type written Title: (Name of the Program, please refer course General Information) Number: (Please refer course General Information) Country Name: Name of Applying Organization: Name of the Nominee(s): 3) 2) Our organization hereby applies for Knowledge Co-Creation program (KCCP) of the International Cooperation Agency and proposes to dispatch qualified nominees to participate programs. Date: Signature: Name: Designation / Position Department / Division Official Stamp	be confirmed and signed	d by the head	of the relev	ant departm	ent / div	rision c	the	applyi	ng organization)
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Confirmation by the organization in charge (if necessary)	International Cooperation programs. Date: Name: Designation / Position Department / Division Office Address and Contact Information	Address: Telephone:	on in cha	Signature Fax:	essar	ualifie	d nor	E-mail	Official Stamp
Confirmation by the organization in charge (if necessary) I have examined the documents in this form and found them true. Accordingly I agree to nominate	International Cooperation programs. Date: Name: Designation / Position Department / Division Office Address and Contact Information Confirmation by the I have examined the division programs.	Address: Telephone: organizatio	on in cha	Signature Fax:	essar	ualifie	d nor	E-mail	Official Stamp
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Part A: Information on the Applying Organization

(to be confirmed by the head of the department / division)

. Profile of C	rganization
) Name of Orga	anization:
	The Province of A Division
2) The mission	of the Organization and the Department / Division:
2 Purnose o	of Application
1) Current Issu in Knowledge addressed.	ues: Describe the reasons for your organization claiming the need to participa Co-Creation Program (KCCP), with reference to issues or problems to
	to the in VCCB
2) Objective: D	Describe what your organization intends to achieve by participating in KCCP.
	1



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Chall make use of the expected

Future Planting	s in addi	essing th	e said iss	ues or pro	blems.			
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	(8)							
Selection	of the No	minee: D	escribe th	e reason(s) the nomi	nee has be	en selecte	ed for the
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Part B: Information about the Nominee

(to be completed by the Nominee)

NOTE>>>The applicants for Knowledge Co-Creation Program (KCCP) (Group and Region Focus) are required to fill in "Every Item". As for the applications for KCCP (Country Focus) including KCCP for Counterpart and some specified programs, it is required to fill in the designated "required" items as is shown below.

2. Number: (Please refe	r course (General Inf	formation)	(require	ed)		pho with n	nominee's photograph (taker within the last thre months) here Size: 4x6 (Attach to the documents to be submitted.)			
Family Name					-		-ii-				
First Name								т т			
Middle Name									_		
					1						
2) Nationality						te of Birt					
as shown in the passpo	rt)					h in Engli					
3) Sex		() Male	()	Female	Date	Mor	ith \	/ear	Age		
4) Religion											
6) Present Position an Organization Department / Division	d Curre	nt Duties									
Present Position											
Date of employment by the present organization	Date	Month	Year	Date of a	_	ent to the	Date	Month	Year		
7) Type of Organization		() 000	al Governr	nental		() Publ	ic Enterp	orise			
() National Government	tal		D/Private (t)	() Univ					
() Private (profit)		() NGC	,	TAGLISPION	٠/	() 01110					
() Other (8) Outline of duties: [Describe	your cu) rrent dut	ies							



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	Address:	
Office	TEL:	Mobile (Cell Phone):
	FAX:	E-mail:
	Address:	
Home	TEL:	Mobile (Cell Phone):
	FAX:	E-mail:
	Name:	
	Relationship to you	
Contact person	Address:	
in emergency	TEL:	Mobile (Cell Phone):
	FAX:	E-mail:
		- In the second

10) Others (if necessary)	

4. Career Record

1) Job Record (After graduation)

		Per	riod		D : 6 L.L. Description	
Organization	City/ Country	From Month/Year	To Month/Year	Position or Title	Brief Job Descriptio	

2) Educational Record (Higher Education) (required)

Z) Luucationai IX		Period				
Institution	City/ Country	From Month/Year	To Month/Year	Degree obtained	Major	



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3) Training or Study in Foreign Countries; please write your past visits to Japan specifically as much

/.	Pei	riod		
City/ Country	From Month/Year	To Month/Year	Field of Study / Program Title	
	City/	City/ From	City/ From To	

5. Language Proficiency (req	uired)			
1) Language to be used in the progra	am (as in GI)			
Listening	() Excellent	() Good	() Fair	() Poor
Speaking	() Excellent	() Good	() Fair	() Poor
Reading	() Excellent	() Good	() Fair	() Poor
Writing	() Excellent	() Good	() Fair	() Poor
Certificate (Examples: TOEFL, TOEIC)				
2) Mother Tongue				
3)Other languages (() Excellent	() Good	() Fair	() Poor

¹ Excellent: Refined fluency skills and topic-controlled discussions, debates & presentations. Formulates strategies to deal with various essay types, including narrative, comparison, cause-effect & argumentative essays.

Good: Conversational accuracy & fluency in a wide range of situations: discussions, short presentations & interviews.

Compound complex sentences. Extended essay formation.

1 Fair: Broader range of language related to expressing opinions, giving advice, making suggestions. Limited compound and complex sentences & expanded paragraph formation.

1 Poor: Simple conversation level, such as self-introduction, brief question & answer using the present and past tenses.



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6. Expectation on the applied KCCP

1) Personal Goal: Describe what you intend to achieve in the applied KCCP in relation to the organizational purpose described in Part A-2.
the standard which are highly relevant in the
2) Relevant Experience: Describe your previous vocational experiences which are highly relevant in the themes of the applied KCCP. (required)
3) Area of Interest: Describe your subject of particular interest with reference to the contents of the applied KCCP. (required)
applied Noon (required)

*7. Declaration (to be signed by the Nominee) (required)

I certify that the statements I have made in this form are true and correct to the best of my knowledge. If accepted for the program, I agree:

- (a) not to bring or invite any member of my family (except for a program whose period is one year or more),
- (b) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating government and the Japanese Government regarding the program,
- (c) to follow the program, and abide by the rules of the institution or establishment that implements said program,
- (d) to refrain from engaging in political activity or any form of employment for profit or gain,
- (e) to return to my home country at the end of the activities in Japan on the designated flight schedule arranged by JICA.
- (f) to discontinue the program if JICA and the applying organization agree on any reason for such discontinuation and not to claim any cost or damage due to the said discontinuation.
- (g) to consent to waive any copyright holder's rights for documents or products produced during the project, against duplication and/or translation by JICA, as long as they are used for the purposes of the program.
- (h) to approve the privacy policy and the copyright policy mentioned in the Guidelines of Application.

JICA's Information Security Policy in relation to Personal Information Protection

- JICA will properly and safely manage personal information collected through this application form in accordance with JICA's privacy policy and the relevant laws of Japan concerning protection of personal information and take protection measures to prevent divulgation, loss or damages of such personal information.
- Unless otherwise obtained approval from an applicant itself or there are valid reasons such as disclosure under laws and ordinances, etc., and except for the following 1.-3., JICA will neither provide nor disclose personal information to any third party. JICA will use personal information provided only for the purposes





in the following 1.-3 and will not use for any purpose other than the following 1.-3 without prior approval of an applicant itself.

- To provide KCCP to the participants from developing countries.
- 2. To provide KCCP to the participants from developing countries under the Citizens' Cooperation Activities.
- 3. In addition to 1. and 2. above, if the government of Japan or JICA determines necessary in the course of technical cooperation.
- (i) to observe Japanese laws and ordinances during my stay, if I violate Japanese laws and ordinances, I will return the total amount or a part of the expenditure required for the KCCP depending on the extent of the violation.
- (j) to understand that JICA does not assure issuance of Japan entry visa even after JICA decide to accept me. I understand the Embassy of Japan will decide it according to necessary formalities upon the submission of visa application from each participant.

Date:	Signature:	
	Print Name:	



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MEDICAL HISTORY

Present Medical Sta On you currently use	tus se any medicine	or have reg	gular medical	checkup by a physici	an for your
illness?					
[] No [] Yes	: Name of illne	ess (), Name o	1 Wedicine
()			"" - " English) the	at describes
If yes, ple	ase attach your o	doctor's lette	er (preferably,	written in English) the	at describes
current st	atus of your illnes	ss and agre	ement to join	the program.	
(b) Are you pregnant	?				
[]No []Yes:	Months of pregna	ancy (months)		
(c) Are you allergic to	any medication	or food?			
I INO I IVes	What are you alle	eraic to? ()_
(d) Please indicate a	ny needs arising	from disab	ilities that mi	ght necessitate addition	nal support
or facilities.	•				
/)
Note: Disability does not	ead to exclusion of	persons with o	disability from th	ne program. However, upo	n the situation,
you may be directly inqui	red by the JICA offic	cial in charge	for a more detai	iled account of your condi	tion.
2. Past Medical Histo					
(a) Have you had ar	v significant or se	erious illnes	s?		
[] No [, - 5	1	Yes:	Please	specify
)	
(b) Have you ever b	een a patient in a	a mental clin	ic or been tre	ated by a psychiatrist	?
[] No [1	Yes:	Please	specify
[] []		320)	
3. Other Medical Pro	blems				
If you have any med	cal problems tha	t are not de	scribed above	e, please indicate belo	W
ii you nave any medi	odi probini				
L cortify that I have	read the above	e instruction	ons and ans	wered all questions	ruthfully and
lataly to the he	st of my knowled	lae.			
Lunderstand and a	accent that medi	ical condition	ons resulting	from an undisclosed	l pre-existing
I understand and a	he financially co	mpensated	by JICA and	d may result in termi	nation of the
	Je illianolany 00		,		
program.					
	Signature				
Date	Signature				
	Print Name				





Appendix-3

Application Form for SDGs Global Leadership Program for FY 2020

1.University Information

(1) After examining university list provided by JICA, please fill in University, Supervisor, and the respective Field of studies that you expect to study in Japan. If you have more than two universities in your mind, you can select <u>up to three universities</u>.

Name of University and Graduate School	
Program and Degree	
Supervisor	Name of Professor ***** Phone number ***** E-mail address*****
Field of Study	

2. Research Plan

Write a brief research plan of your proposed Master's or Doctor's thesis more than 700 words (minimum 3 pages).

Below is an example of the structure of the research plan. Usage of this structure is not essential but strongly recommended.

- (a) TITLE of your Master's or Doctor's thesis
- (b) INTRODUCTION (1 paragraph):

To state clearly what your research interests are. Necessary to include the followings:

- Background information regarding the selected topic and your involvement (e.g. what is the main reason that you chose the topic, your relevant working experience, etc.)
- · The main objective of your study

(c) MAIN BODY (approximately 3 paragraphs):

To provide specific information to support your ideas. To explain what you are going to study and how the research is conducted. Necessary to include the followings:

- Brief explanation for your analysis of this topic.
- · Brief explanation for your research methodology.



(d) CONCLUSION (1 paragraph):

To stress the most important point(s) of your research plan, and your future work. Necessary to include the followings:

- The skills which you wish to obtain in Japan.
- · How you intend to utilize your research to solve the issue(s) mentioned in the first part of the plan after returning to your home country.

*FOR PHD COURSES, PLEASE ATTACH YOUR MASTER THESIS IN ENGLISH AND RELATED PAPERS (IF ANY).

!! IMPORTANT !!

- ✓ It is recommended to make prior contact the faculty before submitting the applications in order to know whether or not the university can accept the research plan. You should write the research plan in light of the requirements and characteristics of the Master's or Doctor's course.
- ✓ It must be demonstrated that your academic background and/or job experience are sufficient enough to engage in and complete the Master's or Doctoral course in Japan. In this regard, it is essential for you to select a research theme which is associated with your current or future job.
- ✓ If you are you are currently employed, it is desirable for you to discuss with your organization to get supporting references, such as a policy and/or strategic paper of the organization.

3. Career Plan after Graduation

In connection with the fields of study, please describe <u>your idea /plan</u> to utilize your knowledge, skills and experiences that you obtained in Japan after returning to your home country <u>in 400-500</u> words.

Please be reminded of the aim of SDGs Global Leadership Program which expects the participants to be leaders who share values of Japan in order to help establish and maintain mid and long term good relations between Japan and the participants' countries