Many college’s study abroad offices have an earlier deadline and additional application process. Please check. Please note: If you are accepted to Japan Study, you will be required to fill out additional application materials for Waseda University. Japan Study will send you these documents to you electronically after you apply.

1. Start your online application at japanstudy.slideroom.com. You can save your application and come back to it at any time, but all application materials must be completed and submitted by the deadline.

2. Discuss your plans to study abroad in Japan with your academic advisor, Japan Study campus representative, and study abroad office. Obtain appropriate signatures for the Approval Form.

3. Complete the Essays Questions.

4. Apply for or renew your Passport, (if necessary). If you do not already have a passport, or if your passport will expire before the end of the program, you will need to apply for one immediately.

5. Request an Official Transcript from each college attended. Include transcripts from college courses taken as a high school student and other colleges. Current transcript must include fall semester grades.

6. Give Recommendation Forms to your references. At least one recommendation letter must be from a professor in a department related to East Asia, Japan, or your major.

7. Ask the Registrar to fill out the Enrollment Verification Form (or similar official letter).

8. Obtain 10 Official Passport Photos, and 2 candid/casual photos. See Photo Instructions page.

9. Complete application, mail items in Box #2 below, and follow up to insure that items in Box #3 are mailed.

10. Once your application is complete, make a digital copy for future reference.

11. You will receive two follow-up Waseda University forms after you have submitted your application in Slideroom. These forms will be emailed to you. You will complete these forms and mail them to us. (No additional photos are necessary.)

<table>
<thead>
<tr>
<th>1. Items You Will Upload by the deadline via japanstudy.slideroom.com</th>
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<tr>
<td>• Student Profile Questions</td>
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<td>• Short Essay Questions</td>
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<td>• Study Plan Essay</td>
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<th>2. Items You Will Mail by the deadline</th>
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<tr>
<td>• Approval Form (signed)</td>
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<td>• 9 - official passport photos (name on back) + 2 candid photos (student keeps one passport photo)</td>
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<tr>
<td>• Waiver Form</td>
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<td>• Passport Photo Page - copy (or proof you applied for your passport)</td>
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<td>• Follow-up Waseda forms (see #11)</td>
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<th>3. Items To Have Mailed by the deadline</th>
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<tr>
<td>• Official transcripts from ALL colleges attended (Registrar), and must include fall semester grades</td>
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<tr>
<td>• Certificate of Enrollment (Registrar)</td>
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<tr>
<td>• Letters of Recommendation (Faculty)</td>
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Mailed items listed above (Box #2 and #3) should be received by the deadline to the following address:

Japan Study
Earlham College
801 National Road West
Richmond, IN 47374

Questions? Phone 765-983-1224 / Fax 765-983-1798 / japanstu@earlham.edu / DO NOT USE UPS FOR MAILING ITEMS. PLEASE USE USPS OR FEDEX
JAPAN STUDY PHOTO INSTRUCTIONS

You will need a total of 12 photographs (10 passport size + 2 candid shots). Please use exact sizes below. Legibly write your full name on all photos in non-smearing ink on the back.

a. 10 official passport photos sized at 2 in x 2 in
   *Keep one passport photo for your visa application that you will complete at a later date.

b. 2 candid/casual photos of you - photos appropriate for your host family

Additional Information about Passport Photos

- Photos must be official passport photos. Scanned, copied, or self-taken photos are not acceptable
- Photos must be the correct sizes
- Do not use cut-down high-school senior photos or snapshots
- Either black and white or color photos are acceptable
- Photos should be recent, head/shoulder shots.
- Do not wear dark glasses, hats, hairpieces, scarves, etc.
- Many drugstores take sheets of passport photos at a reasonable cost
JAPAN STUDY APPROVAL FORM

Student Name: _______________________________

College: ___________________________________

Check Option:
☐ Academic Year, ☐ Fall Semester, ☐ Fall Semester + Cultural Internship, ☐ Spring Semester:

STUDENT SIGNATURE (after signing, please obtain the appropriate signatures below)

I do hereby authorize Japan Study to forward any of my application materials to any educational institution or personnel who expect or require such information as part of the procedure for admittance or placement related to this program. I hereby certify that the information that I have provided in this application is complete and accurate to the best of my knowledge as of this date. I authorize all College offices and personnel to release my records to Japan Study as needed to facilitate my application to the program. I further understand that, if accepted, I will be required to submit other program specific materials.

Signature of Student __________________________ Date __________________________

FACULTY/STAFF SIGNATURES

INTERNATIONAL PROGRAMS DIRECTOR APPROVAL
This signature affirms both your approval and the college's approval of the student's application to Japan Study and affirms that the student is in good academic and social standing. If not, please attach a statement regarding the details on college letterhead.

Signature of International Program Director __________________________ Date ____________

Printed Name of International Program Director __________________________ E-mail and Phone __________________________

ACADEMIC ADVISOR APPROVAL
This signature affirms that the student has consulted with the appropriate academic and/or faculty advisors to ensure that the Japan Study program is consistent with their academic program.

Signature of Academic Advisor __________________________ Date __________________________

Printed Name of Academic Advisor __________________________ E-mail and Phone __________________________

JAPAN STUDY CAMPUS REPRESENTATIVE APPROVAL
This signature affirms that the student is an acceptable candidate for the Japan Study program.

Signature of Japan Study Campus Rep / Advisor __________________________ Date __________________________

Printed Name of Japan Study Campus Rep / Advisor __________________________ E-mail and Phone __________________________

Please mail to: Japan Study, Earlham College, 801 National Road West, Richmond, IN 47374
JAPAN STUDY APPLICATION ESSAYS

IMPORTANT INSTRUCTIONS
• Use 1” margins and 12 point font
• Retype each question and write your answer below it
• Place your name, your college name and page number on each page, top and bottom
• AND
• Upload essays to japanstudy.slideroom.com

STUDENT PROFILE QUESTIONS
1. What languages, including Japanese, have you studied? Indicate number of college years (completed or equivalent) that you will have by the end of this academic year.

2. List all East Asian related courses that you have taken or will have taken by the end of this academic year.

3. List your overseas experience for the past five years. Include only country and days/weeks spent in country. If you have lived outside the United States for longer than 2 months, please explain the circumstances of your stay.

SHORT ESSAY QUESTIONS -750 - 1000 words total for the following 5 questions.
1. What special interests do you have? In what organizations or activities are you involved?

2. How long have you been interested in Japan? In what non-course related ways have you pursued your interests? (e.g., people you have met, books you have read, etc.)

3. Learning about Japan is central to success on Japan Study. How do you plan to pursue your study of Japan outside of coursework at Waseda? Give concrete examples.

4. What are the three greatest challenges you expect to encounter in making the transition to living and studying in Japan? How would you attempt to deal with such challenges?

5. If you have chosen the semester option, explain why you have chosen this option rather than the academic year program.

STUDY PLAN ESSAY -750 words minimum (minimum of 2 pages).
In a separate document, with your name and your college name at the top and bottom of each page, explain your academic objectives (beyond language or cultural acquisition) and academic fields in which you wish to accomplish them during your study abroad at Waseda University. How does participation on Japan Study fit into your overall four-year academic career? Refer to specific courses that you would consider taking at Waseda to support your major. See the Japan Study website for a tentative list of courses.
JAPAN STUDY / WASEDA UNIVERSITY
LETTER OF RECOMMENDATION FORM

DUE DATE: January 6th

To the Applicant:

This form should be given to a dean, academic advisor, a full-time professor or teaching instructor at your current institution under whom you have studied and who is able to comment on your qualifications for study at Waseda University.

Applicant's Name: __________________________________________

Check one: ☐ I waive my right to see this recommendation
☐ I do not waive my right to see this recommendation

__________________________ ____________________________
Signature of Student Date

To the Recommender: The applicant has applied to the Japan Study program and has listed you as a reference. The Japan Study program includes course work in both Japanese language and Japanese studies at Waseda University, an orientation program, living with a host family, and a one-month cultural internship.

Please use college letterhead when writing your recommendation and include your name, title and signature.

In your letter, please include information regarding the student’s:

☐ Academic achievements - class rank and academic strengths, etc.;
☐ Behavior / performance in the classroom – maturity, motivation, working well with others, etc.
☐ Skills / capacity which the applicant needs to develop, social and academic, while studying in Japan and in general.

Please consider the following questions when writing your recommendation letter.

1. Does the applicant have valid educational reasons for participating in this program?
2. Describe any particular difficulty that the applicant may have with the program as a whole or with certain aspects of it, including adjusting to a new environment.
3. Does the applicant have any particular strengths that will prove to be assets during the stay in Japan?
4. Please add any comments you believe will be helpful to either the selection committee or the program staff.

Name: __________________________________________ Position/title: _________________________________

College: ___________________________ E-mail Address: _________________________________

Relationship to Applicant: __________________________ How long have you known the applicant: _____ Year(s)

Signature: ____________________________ Date: _________/______/__________ (month/day/year)

Please mail your signed, hard copy reference, on college letterhead to:
Japan Study
Earlham College
801 National Road West
Richmond, IN 47374
JAPAN STUDY / WASEDA UNIVERSITY
LETTER OF RECOMMENDATION FORM

DUE DATE: January 6th

To the Applicant:

This form should be given to a dean, academic advisor, a full-time professor or teaching instructor at your current institution under whom you have studied and who is able to comment on your qualifications for study at Waseda University.

Applicant's Name: __________________________________________________________

Check one: ☐ I waive my right to see this recommendation
☐ I do not waive my right to see this recommendation

Signature of Student __________________________ Date _______________________

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Relationship to Applicant: __________________________ How long have you known the applicant: _____ Year(s)

Signature: __________________________ Date: _______ / _____ / _______ (month/day/year)

Please mail your signed, hard copy reference, on college letterhead to:
Japan Study
Earlham College
801 National Road West
Richmond, IN 47374
Japan Study Waiver, Release of Liability, Indemnification, and Consent to Medical Attention

In exchange for my being allowed to participate in the Japan Study program ("Japan Study") managed and administered by Earlham College ("Earlham"), I, and if I am not yet 21 years old, my parent or legal guardian (individually and collectively referred to below in the first person singular) agree to be bound by each of the following:

1. Voluntary Participation. I understand and confirm that my participation in Japan Study is voluntary.

2. Recognition. I understand that Japan Study is recognized by the Great Lakes Colleges Association, Inc. ("GLCA"), and the Associated Colleges of the Midwest ("ACM"). Recognition by GLCA and ACM allows students from their affiliated colleges to receive academic credit for completing the Japan Study, and, when eligible, financial support.

3. Identification of Risks. I understand that portions of Japan Study take place in Japan. I understand that I will engage in activities in the United States, Japan, and, possibly, other countries that are not conducted, controlled, supervised or monitored by Japan Study staff or other representatives of Earlham (for example, personal travel, shopping, recreation, lodging and other social activities). I understand that my participation in Japan Study involves risk of injury and loss, both to person and to property. I also understand that the risk of injury includes the possibility of permanent disability and death. I understand that this Waiver and Release of Liability is intended to address all of the risks of any kind associated with my participation in any aspect of Japan Study, or with the time I am involved in Japan Study, including, particularly, such risks created by actions, inactions, or negligence on the part of Earlham, or ACM or their trustees, directors, officers, employees, agents, volunteers, successors, assigns, or member institutions, including but not limited to, risks created by the following: (a) the use and condition of various modes of transportation, premises, facilities, and equipment; (b) the lack or inadequacy of policies, rules, or regulations of Japan Study; (c) the failure of Earlham or ACM to foresee or to protect me from actions, inactions, negligence, recklessness, or intentional or criminal misconduct of persons, other than those under the particular entity's control; (d) the inadequacy or unavailability of medical facilities or treatment; or (e) the lack or inadequacy of supervision.

4. Assumption of Risk. I assume all risks, known and unknown, foreseeable and unforeseeable, in any way connected with my participation in Japan Study. I accept personal responsibility for any liability, injury, loss, or damage in any way connected with my participation in Japan Study.

5. Release and Waiver. I release Earlham and ACM and their trustees, directors, officers, employees, agents, volunteers, successors, assigns and member institutions from any and all liability for, and waive any and all claims for, injury, loss, or damage in any way connected with my participation in Japan Study, whether or not caused in whole or in part by the negligence or other misconduct of Earlham or any of the entities or individuals mentioned above (a "Claim").

6. Indemnification. I agree to indemnify and to hold harmless (in other words, to reimburse and to be responsible for) Earlham and ACM and their trustees, directors, officers, employees, agents, volunteers, successors, assigns and member institutions from any Claim or any expense, including attorneys' fees (including the cost of defending any Claim I might make, or that might be made on my behalf, that is released or waived by this instrument), in any way connected with any Claim.

7. Binding Effect. This instrument shall be binding upon my relatives, personal representatives, heirs, beneficiaries, next of kin, or assigns and shall inure to the benefit of Earlham, ACM, GLCA and their respective successors and assigns.

8. Consent to Medical Treatment. I authorize Earlham to provide to me, through medical personnel of their choice, customary medical assistance, transportation, and emergency medical services. This consent does not impose a duty upon Earlham to provide such assistance, transportation, or services.

9. Severability. If any provision (or portion of any provision) of this instrument is held to be invalid or unenforceable, that provision shall be enforceable in part to the fullest extent permitted by law, and such invalidity or unenforceability shall not otherwise affect any other provision of this instrument.

10. Applicable Law. Because Japan Study is headquartered in the State of Indiana, and in order to provide certainty in the law to be applied to the construction of this instrument, this instrument shall be governed, construed, and enforced in accordance with the law of the State of Indiana.

THIS IS A WAIVER AND RELEASE OF LIABILITY. I HAVE READ THIS WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION, AND CONSENT. I UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I AM SIGNING THIS WAIVER, RELEASE OF LIABILITY, INDEMNIFICATION, AND CONSENT VOLUNTARILY.

PRINTED NAME (student) ____________________________________________  DATE ____________

SIGNATURE ____________________________________________  DATE ____________

If person participating in Japan Study is not yet 21 years old, then both student and parent/ or legal guardian must sign this form: In exchange for my child or ward being allowed to participate in Japan Study, and as the parent or legal guardian of the above-named individual, I verify that I fully understand, agree to, and accept all provisions of this Waiver, Release of Liability, Indemnification, and Consent.

PRINTED NAME (parent or guardian if student under 21) ____________________________________________  DATE ____________

SIGNATURE ____________________________________________  DATE ____________

Please mail to: Japan Study, Earlham College, 801 National Road West, Richmond, IN 47374 or fax to 765-983-1798
ENROLLMENT VERIFICATION FORM

This is to certify that the following student is registered as a regular, degree-seeking, full-time student in good standing.

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<tr>
<th>Name of Student</th>
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<tr>
<th>Name of College</th>
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<th>Major</th>
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<tr>
<th>Class Level (Fr/So/Jr/Sr)</th>
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<tr>
<th>Expected date of Graduation</th>
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<tr>
<th>Degree to be Awarded</th>
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Registrar’s Name: ______________________________________________________

Registrar’s Signature: ___________________________________________________ 

Date: __________________________________________________________________

Seal: ________________________________________________________________