MEIKAI UNIVERSITY ELIGIBILITY CHECK FORM

ame: Fi	amily			e of Birth:	Year/Month/Date
nder: M / F	Em	ail address:			
itionality(ies):			Native language(s):		
DUCATIONAL BA			imaniahan ata)		
		N (e.g. grade school, pr Location	Dates of Attendance	Year	Language or
Name of School	(5)	(City, State/Province & Country)	(from Year/Month to Year/Month)	(Grade) in School	Instruction
TCOME A DV CD	ICATION:				
			nior high school, senior high		Language
Name of School	(s)	Location (City, State/Province & Country)	Dates of Attendance (from Year/Month to Year/Month)	Year (Grade) in School	Language of Instruction
Date of graduation	า:		(Year/Month/Date)		
vensite address o	r your nig	jn school you are gradi	vated from, if available:		
			ed college-bound program v		ou to enter four-
		ur high school curriculu the examination or the		□ NO	
yes; what is the i		THE CAUTHINGTION OF THE	program:		
IIGHER EDUCATI	ON (e.g.	college)		3	4.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Name of School(s)	Location	Dates of Attendance	Year	Language of
		(City, State/Province & Country)	(from Year/Month to Year/Month)	(Grade) in School	Instruction

◆Degree obtained (Associate, Bachelor etc.):