

Annex. 2: Details of Current and Previous
Work Experience, Research Plan and Career Plan after Graduation

Details of Current and Previous Work Experience

Please describe your responsibilities in your current and previous work within 150 words each. Make sure to sign on every page.

➤ **Current Work** (150 Words)

➤ **Previous Work** (150 Words)

Research Plan

Write a brief research plan of your proposed thesis in 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 is strongly recommended.

(a) TITLE of your thesis

(b) INTRODUCTION (1 paragraph):

You will state clearly what your research interests are. It is necessary to include the following:

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

(c) MAIN BODY (approximately 3 paragraphs):

You will provide specific information to support your ideas. Explain what you are going to study and how the research is to be conducted. It is necessary to include the following:

- Brief explanation of your analysis on this topic.
- Brief explanation of your research methodology.

(d) CONCLUSION (1 paragraph):

You will stress the most important point(s) of your research plan, and your future work. It is necessary to include the followings:

- The skills 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.

ABE Initiative/SDGs Global Leader FY2025
1-2.ANNEX 2
* HANDWRITTEN FORMS will not be accepted

Reg. No _____
Name _____

***If you are applying for a PhD course within the SDGs Global Leader program, please attach your Master's thesis in English and related papers (if any).**

!! IMPORTANT !!

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

Career Plan after Graduation

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

Please be reminded of the aim of the ABE Initiative/SDGs Global Leader that expects the participants to contribute to the development of industries of their home countries, to utilize the networks which are built up during participants' stay in Japan, and to continue to foster good relationships between their countries and Japan.



ABE Initiative JFY2025

Instruction

1. Fill-in all YELLOW areas (or cells) of this form by computer. (Do NOT handwrite)
2. Fill in the form in English
3. All YELLOW areas MUST be filled-in (Do not leave these areas blank. Please write "N/A" if not applicable).
4. Write proper nouns in full spelling without abbreviation or any omission.
5. Verify what you have entered above using the "Check List" at the later part of the Application Form sheet.

Annex.1 Declaration of desired universities placement

"All applicants are required to specify first and second choice of desired universities by reference to "University Information for the Applicants". All applicants can select up to two choices of their desired universities.

※NOTE※ Please follow the below rules :

RULE 1:

A candidate can only apply for ONE university/department/course for the 4th selection. (However, in some case, a candidate might be able to apply for two universities/departments/courses for the 4th selection.)

RULE 2:

When writing the "Desired University Placement", a candidate can only desire ONE university without pre-matching (3rd selection), and that university needs to be the applicant's first choice.

Reg. No. _____ Name of Applicant: _____

Please be noted:

All applicants are required to specify the desired universities by reference to University list provided by JICA.

Regardless of the application period, you may choose up to three (3) courses from the University List.

Please select a research field from the "List of research fields" and input a section code

Your Research:

Section Code		
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How well does your research and your desired university research field match

*Please refer to "Your Research and University Research Field" in each section of your first to third choice universities.

Highly Matched : The section code you selected matches the one specified by the university (more detailed content), so it's a highly match.

Matched : Your research and the university's research field are matched.

Need to be verified : Since the university does not specify a research field code, please check the university's website carefully to make sure that your research matches.

Not Matched : Your research does not seem to match the university's research field. Please select again.

Priority of Choice 1

Website for the graduate school:

Graduate School Code	Your research and university research field	Matching or Without matching		Supervisor of choice*		
		Supervisor of choice*				
Name of Selected University	Graduate School	Course/Major	Name of laboratory	Name of Supervisor	Master/PhD	Input the name of supervisor of your choice if it was mandatory
Reasons for applying to the university of your first choice						

Priority of Choice 2

Website for the graduate school:

*Graduate School for Without_PreApplication_Matching cannot be selected as a second choice. First choice only

Graduate School Code	Your research and university research field	Matching or Without matching		Supervisor of choice*		
		Supervisor of choice*				
Name of Selected University	Graduate School	Course/Major	Name of laboratory	Name of Supervisor	Master/PhD	Input the name of supervisor of your choice if it was mandatory
Reasons for applying to the university of your second choice						

* If your choice of supervisor is "Mandatory", you must fill in "Supervisor of choice". Please check the University List for details.

[IMPORTANT] Your personal information (educational background, career, health condition, health certificate, etc.) will be released to the universities you have chosen. Please check the university website for details of privacy policy of each university.



Annex 3 Medical History

1. Present Medical Status

a) Have you taken any medicine or had a medical checkup by a physician for your illness such as diabetes, hypertension, asthma, etc.?

	Name of illness	
	Name of medicine	

If yes, please attach your doctor's letter (preferably, written in English) that describes the current status of your illness, and gives agreement to your participation in the program.

b) Do you have any allergies with medicine, food, pollen, etc.?

	What are you allergic to? What kind of allergic symptoms do you have such as itch, rash, hives, etc.?	
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c) Please indicate any needs arising from disabilities that may require additional support or facilities

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NOTES: Disability will not lead to exclusion of the Applicant from the program. However, the Applicant may be directly inquired by the JICA official in charge for a more detailed account of his/her condition.

2. Medical History

a) Have you had any illness such as heart, hepatic, kidney disease, etc.?

	please specify	
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b) Have you ever been a patient in a mental clinic or been treated by a psychiatrist?

	please specify	
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c) Have you ever had any sleeping, eating or other disorders?

	please specify	
	Name of medicine taken if any	

d) Please indicate history of all illnesses you have had

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3. Tuberculosis Screening

a) Do you have any history of previous TB?

	please specify	
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b) Has anyone in your household been diagnosed with TB in the last 2 years?

	please specify	
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c) Do you have any history of recent contact with a case of active pulmonary TB? (shared the same enclosed airspace or household or other enclosed environments for a prolonged period for days or weeks)

	please specify	
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d) Do you have any history of or are you currently immune compromised (HIV infected, chronic renal failure, malignant tumors, etc.)? Do you have any history of using immunosuppressant (steroids, anti-cancer drugs, rheumatic drugs, etc.)?

	please specify	
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e) Have you (or your household) had any of the following symptoms in the last three months?

	Symptom type	
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4. Vaccination history

<input type="checkbox"/> MMRV (Measles, Mumps, Rubella, Zoster)	Time(s)
<input type="checkbox"/> MMR (Measles, Mumps, Rubella)	Time(s)
<input type="checkbox"/> MR (Measles, Rubella)	Time(s)
<input type="checkbox"/> M (Measles)	Time(s)
<input type="checkbox"/> Mumps	Time(s)
<input type="checkbox"/> Hepatitis B	Time(s)
<input type="checkbox"/> Chicken pox	Time(s)
<input type="checkbox"/> Meningitis	Time(s)
<input type="checkbox"/> Polio	Time(s)
<input type="checkbox"/> Diphtheria Pertussis Tetanus combined	Time(s)

5. Other Conditions/Medical Issues

Are you pregnant? **Noted: Answer does not affect the selection of candidates.**

Weeks of pregnancy	Month	Expected date of delivery	
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If you have any medical issues/conditions that are not described above, please indicate below:

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I certify that I have read the above instructions and answered all questions truthfully and completely to the best of my knowledge.
 I understand and accept that medical conditions resulting from an undisclosed pre-existing condition may not be financially compensated by JICA and may result in termination of the program.
 I understand and accept that this questionnaire will be checked for my health care by the people who are engaged in the program during my stay in Japan.

By Applicant

Date	
Name and Title/Position	
Signature	



ABE Initiative JFY2025
(JICA Knowledge Co-Creation Program)(KCCP)
(JICA Development Studies Program)
APPLICATION FORM

Reg.No _____

Instructions

1. Fill-in all YELLOW areas (or cells) of this form by computer. (DO NOT handwrite.).
2. Fill in the form in English.
3. All YELLOW areas MUST be filled-in (Do not leave these areas blank. Please write "N/A" if not applicable).
4. Write dates in the order of day, month, year (ex.: 31st day of January, 2025 is "31/Jan/2025").
5. Write proper nouns in full without abbreviation.
6. Check your application form using the check lists at the bottom of this application form.
7. Print out all pages after entering required information in all questions.
8. Obtain Signature(s) of the applicant's present organization (if necessary, digital stamp/signature is acceptable.).

1. Personal Information

1-1. Course

ABE Initiative

Color Photo
(4cm×3cm)

Paste your photo
taken within
6 months.

1-2. Number (Not need to fill in. JICA will inform after selection Procedures)

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1-3. Information about the applicant

Family Name			
First Name			
Other Name (If any)			
Gender for Visa application		Date of Birth (Day/Month/Year)	/ /
Nationality		Age (As of 1/Apr/2025)	
Resident Country			
City/Town		TEL (Primary)	Country Code
State/Province		TEL (Secondary)	Country Code
Email			Passport possession

1-4. Contact Person in Emergency (2 Persons)

1	Name			Relationship	
	Province & Country	TEL	Country Code	Email	
2	Name			Relationship	
	Province & Country	TEL	Country Code	Email	

2. Educational Background (Higher Education)

Instructions

1. Exclude kindergarden education and nursery school education.
2. Preparatory education for university admission is included in upper secondary education.
3. If you attended multiple schools at the same level of education due to moving house or readmission to university, modify level column and write the schools in the separate rows.
4. Any school years or levels skipped or repeated should be indicated in the Remarks column.
5. End date for Higher Education should match with the date on the graduate certificate which you submit.
6. Academic Degree must be filled for Higher Education level. (If not obtained any degree, write "N/A")

Name of Educational Institution	Province, Country	From (Month) / (Year)	Type of Academic Degree Obtained	Major
Name of Faculty / Department / School		To (Month) / (Year)		
		From /		
		To /		
		From /		
		To /		
		From /		
		To /		
		From /		
		To /		

If the period you have entered in 2. Educational Background above does not match a regular academic period, please indicate your reason in "Remarks" below.

Remarks	
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1) Language Proficiency Indicate your English abilities with reference to the following.

English Proficiency	Listening			
	Speaking			
	Reading			
	Writing			
	Certificate (Please specify Name of Certificate) ex.: TOEFL, IELTS			
If Others; specify				
Score points obtained				
Test Dates		Day	Month	Year
Your Mother Tongue				

- 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.
- Fair:** Broader range of language related to expressing opinions, giving advice, making suggestions. Limited compound and complex sentences & expanded paragraph formation.
- Poor:** Simple conversation level, such as self-introduction, brief question & answer using the present and past tenses.

2) Have you ever been awarded a scholarship for studying abroad?

	Name of scholarship				
	Duration	From	/	To	/

3) Are you currently applying for any scholarship(s), other than ABE Initiative Program?

	Name of scholarship	
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4) Have you ever participated in any training course in your country or abroad including any offered by JICA?

	Name of the course				
	Country you visited		Name of the institution or the agency		
	Duration	From	/	To	/
	Name of the course				
	Country you visited		Name of the institution or the agency		
	Duration	From	/	To	/
	Name of the course				
	Country you visited		Name of the institution or the agency		
	Duration	From	/	To	/

3. Present Organization and Nomination

3-1. Present Organization and Position

Categories of Organization		Types of organization	
Name of Organization			
Department / Division			
Position			
Date of employment	/ /	Date of assignment to the present position	/ /
Province & Country		TEL	Country Code
			Email

Categories of Organization	Types of Organization	Description
A. Ministry / Government Institution	National Government	Ministry or Federal Institution
	Local Government	Governmental Institution run by state/province or city/town
	Public Enterprise	Government-owned corporation or facilities
B. Higher Education and TVET	University	Either public or Private University
C. Private Sector	Private(Japanese) Private Japanese company including Private School	Private company including Private school
	Private(Non-Japanese) Private Non-Japanese company including Private School	
D. Others	NGO/Private(non-profit)	NGO or non-profit organization
	Self-employed	Freelancer (if you own a company, chose "Private")
	Fresh Graduate	Just graduated or will Graduate soon from University and not working
	Unemployed	not working
	Others	Any status not applying to all above

3-2. 【Questionnaire on Relationship with the Military】 (FOR ALL THE APPLICANTS)
Please mark Yes or No about your status.

	Personnel of the military or organizations under the military (active military personnel or military personnel listed in the muster roll/military register)
	Personnel of the Ministry of Defense, or organizations under the Ministry of Defense
	Personnel of organizations that are specified by law under the military or the Ministry of Defense in case of an emergency
	Persons listed in the muster roll/military register who are not currently affiliated with the military, the Ministry of Defense, or affiliated organizations
	Personnel of civilian organizations which have divisions to conduct military-related activities

3-3. Confirmation of the nomination by the applicant's present organization

I agree to nominate this person as qualified nominee to participate in the programs on behalf of our organization.

Date		Signature	
Name			
Department / Division			
Position			
TEL	Country Code		
Email			

- * This confirmation is necessary if the applicant's present organization is the ministry / government institution or any higher education and TVET institution
 If the applicant is from other institution like private sector, this confirmation is not mandatory.

Confirmation by the organization in charge (if there is no Note Verbale/ Letter from the government nominating the applicant)

I have examined the documents in this form and found them true. Accordingly I agree to nominate this person(s) on behalf of our government.

Date		Signature	
Name			
Department / Division			
Position			

- * If the applicant is from other institution like private sector, this confirmation is not mandatory

5. Declaration

I declare to apply for ABE Initiative with a full understanding of the General Information, especially the articles stipulated below:

(1) APPLICATION

1. All information answered and provided in this application form by me, is true and accurate to the best of my knowledge and ability.
My application will be cancelled if any information is proven to be false.
2. All information provided by me in this application form had been approved by my supervisor in my organization
(Required only for Governmental Officials (including public organizations) and/or Educators.)
3. An application form which is incomplete or missing any necessary document(s) will be deemed ineligible and not considered.
4. The selection procedure and results rest entirely with JICA as the secretariat of ABE Initiative. No inquiries or objections by applicants regarding the result of the selection process will be considered.
5. Submission of a master's thesis is optional for doctoral candidates

(2) OBJECTIVE OF THE PROGRAM

- (2-1) When I am accepted for the Program, I agree
- 2-1-1. that the objective of the program which is written in G.I. Therefore, I will participate in additional programs as being instructed in G.I if necessary.
 - 2-1-2. that I am required to contribute to the development of my nation's long-term good relationship with Japan after completing the course in Japan,
 - 2-1-3. that the objective of the program is not provision of employment in Japan upon completion of the program.

(3) JICA's GUIDELINES

【General Rules】

The accepted applicants/participants are requested:

- (1) to understand that participants must physically come to Japan to participate in this program at the date designated by JICA,
- (2) not to change the air ticket (and flight class and flight schedule arranged by JICA) and lodging by the participants on their own,
- (3) not to change course subjects or extend the course period,
- (4) to understand that inviting participant's family members is not recommended before their stay in Japan has passed more than 6 months,
- (5) to return to their home country on the designated flight by JICA, when they finish the program/course or when it is deemed impossible to finish the program within the program period, or when the participant is not successful on the regular course examination,
- (6) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating Government and the Japanese Government in respect of the course,
- (7) to enroll and complete JICA-DSP online courses, when you receive JICA's instructions to do so.
- (8) to observe the rules and regulations of the program implementing partners to provide the program or establishments. ("Plagiarism" especially is taken severely by enrolling university, regardless of whether it is direct plagiarism or self-plagiarism and participants may be subjected to disciplinary action such as suspension),
- (9) not to engage in political activities, or any form of employment for profit,
- (10) to agree to be discontinued of the program, should the participant (a) violate Japanese laws, JICA's regulations, or University's regulations, (b) commit illegal or any type of immoral conduct including sexual harassment, (c) become critically ill or seriously injured after arrival in Japan.
- (11) to be responsible for paying any cost for treatment of the said health conditions except for the medical care expenses described in the table of "11. Expenses To be borne by JICA,"
- (12) to return the total amount or a part of the expenditure for KCCP depending on the severity of such violation, should the participants violate the laws and ordinances,
- (13) not to drive a car or motorbike, regardless of an international driving license possessed,
- (14) to observe the rules and regulations at the place of the participants' accommodation,
- (15) to refund allowances or other benefits paid by JICA in the case of a change in schedule,
- (16) to accept that the Government of Japan will examine applicants who belong to the military or other military-related organizations and/or who are enlisted in the military, taking into consideration of their duties, positions in the organization and other relevant information in a comprehensive manner to be consistent with the Development Cooperation Charter of Japan,
- (17) to submit a Health Certificate in JICA format at the participant's expense, when the participant applied to the entrance examinations or within 6 months before arrival in Japan, whichever is later.
- (18) to accept to submit a second Health Certificate in JICA format if deemed necessary by JICA. The cost of acquiring the Health Certificate will be borne by JICA unless it is required due to the candidates' fault.
- (19) to promptly resubmit your medical history, if there are changes in your health condition, such as pregnancy or a pre-existing disease,
- (20) to be in good health to participate in the program. In order to reduce the risk of worsening symptoms associated with respiratory tract infection, please be honest when consulting the doctor for your Health Certificate,
- (21) not to be receiving nor plan to receive another scholarship during the program.
- (22) to understand not to make other applications for different JICA training courses at the same time, and
- (23) to understand that the maximum duration of "Overseas research" and "Temporary Leave (leaving Japan for private purpose)" is 60 days, in principle.
- (24) to accept to take tuberculosis related inspections organized by JICA after arriving in Japan and to submit the results to JICA and university.

【Privacy Policy】

The participants/applicants are requested to understand Privacy Policy of JICA as follows.

- (1) **Scope of Use**
Personal information specified in this form will be stored, used, or analyzed by JICA only within the scope of conducting and supervising JICA's technical training (long-term) (selection, coordination, travel and life support of the participants in Japan) which is stipulated in the Japan International Cooperation Agency Organization Regulations. The personal information contains also medical history information and health certificate.

JICA will provide the personal information to the universities that the applicants wish to enroll.
Once the candidate is accepted by a university, JICA will make a contract for the implementation of the program with that university.

JICA will not use the acquired personal information for purposes other than the above.
JICA will take safety management measures for the acquired personal information and manage it appropriately in accordance with the privacy policy and internal rules.

(2) Provision of acquired personal information to a third party

JICA shall never provide personal information to third parties except as required by law.
However, in the following cases, we will provide personal information and will take the following measures.

(a) **In the case of contracted universities for the implementation of the program**
The use of the personal information is limited to the scope of the commissioned tasks (implementation of the program) and JICA will request the commissioned party to take safety management measures and manage it appropriately, and will confirm the implementation status.

(b) **In the case of uncontracted universities for the purpose of admission screening**
The use of the personal information is limited to the admission screening of the applicants by universities (career, academic background, research plan, medical history information and medical certificate), and JICA will notify the applicants of the name of the universities to which the information is provided and the privacy policy of the universities at the time of its provision.