



DATE OF SUBMISSION

DD/MM/YYYY

# EBA INDEPENDENT FIELDWORK

**APPLICATION FORM**

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| applicant INFORMATION |

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| Full Name:(As appears in Passport)  |  | Photo\* |
| Date of birth: (DD/MM/YYYY) | Age: |
| Nationality: | Gender: |
| Home address: |  |
| Zip code: |
| Affiliation (Faculty):  | Grade: | Student ID Number: |
| Name of Advisor Advisor’s Seal/Signature |
| Advisor’s Contact Affiliation  Email Address |
| Major: | Religion (Optional): |
| Home Phone/Mobile Phone: | E-mail: |
| **Is this your first time to join EBA courses and/or activities?** 🞎 Yes 🞎 NoIf you chose “No”, please write down which course/activity you joined in the past:  |
| \* Photos must be properly focused with a full-face view |
|  |
| PersonS to be notified, in case of emergency（2 persons） |

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| Name (in full): |
| Home address: | Zip code: |
| Home Phone/Mobile Phone: |
| Relationship with the applicant: |

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| Name (in full): |
| Home address: | Zip code: |
| Home Phone/Mobile Phone: |
| Relationship with the applicant: |

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| Fieldwork Proposal (800 Words): Title, Purposes, Content, Plan and Expected Results *Please tick the boxes that are appropriate to your research interest before writing the proposal*

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| --- | --- | --- |
| Area of research □ Energy and Environment □ Health and Environment □ Disaster and Security □ Others: \_\_\_ |  Fieldwork Location □ Vietnam       □ Thailand      □ Indonesia □ Malaysia       □ Philippines    □ Myanmar | Period of FieldworkFrom\_\_\_ To \_\_\_ |

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| **HOW TO SUBMIT**After filling out this form, please submit the application by e-mail to: eba-submit@ml.keio.jp with subject ”EBA Independent Fieldwork Application: YOUR FULL NAME”\*Please note that we will not disclose your personal information to a third party without your consent. |

Receipt (Please do not fill in this column)：