

APPLICATION CHECKLIST
MASTER'S PROGRAM IN PUBLIC POLICY AND TAXATION
YOKOHAMA NATIONAL UNIVERSITY

Use the checklist below to make sure you have completed all the required documentation before submitting your application. This is provided for your information only. **Please do not send this checklist in with your application.**

Application deadline is **January 30th, 2026**

- ☐ Application Form for Admission in 2026-2027 Academic Year
- ☐ Statement of Purpose
- ☐ Two Confidential Letters of Recommendation
- ☐ Official Academic Transcripts
- ☐ Official TOEFL/IELTS/Duolingo English Test (DET) Score Record or a letter from your undergraduate institution confirming that the primary language of instruction is English
- ☐ Official GRE Score (if available)

APPLICATION FORM FOR ADMISSION IN 2026-2027 ACADEMIC YEAR

MASTER'S PROGRAM IN PUBLIC POLICY AND TAXATION

YOKOHAMA NATIONAL UNIVERSITY

PLEASE TYPE OR PRINT CLEARLY

1. Have you previously made an application to the program? ☐ No ☐ Yes

2. Family Name _____

First Name _____

Middle Name _____

3. Gender ☐ Female ☐ Male

4. Birth date (month/day/year) _____/_____/_____

Age (as of October 1, 2026) _____

5. Country of Citizenship _____

6. Marital Status ☐ Single ☐ Married

7. Mailing Address*

Office

Department _____

Institution _____

Address _____

_____ Zip code _____

Country _____

Phone _____/_____/_____

Country code Area code Phone number

Fax _____/_____/_____

(official work)

E-mail _____

Home

Address _____

_____ Zip code _____

Country _____

Phone _____/_____/_____

Country code Area code Phone number

Fax _____/_____/_____

(secondary)

E-mail _____

Attach photograph
taken within the
last 6 months.

*Please avoid using freemail accounts and instead use your work e-mail when possible.

8. Proof of English Proficiency. Please check which of the following you will provide:

☐ TOEFL

☐ IELTS

☐ DET

☐ Official University Letter

Date of test _____ Date of test _____ Date of Test _____

TOEFL, IELTS and DET (Duolingo) must be sent directly from testing centers to YNU.

TOEFL ITP is not acceptable.

For Admission in 2026-2027 Academic Year

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9. Education List all institutions where you have received or will receive a degree. In addition, list all other post-secondary institutions attended. (Most recent first)

1. **Institution** _____

Location (city/country) _____

Major Field _____ Degree/Diploma _____

Dates Attended _____ Date Deg Rec'd/Expected _____

2. **Institution** _____

Location (city/country) _____

Major Field _____ Degree/Diploma _____

Dates Attended _____ Date Deg Rec'd/Expected _____

3. **Institution** _____

Location (city/country) _____

Major Field _____ Degree/Diploma _____

Dates Attended _____ Date Deg Rec'd/Expected _____

10. Employment (Most recent first)

1. **Name of Employer** _____

Location (city/country) _____

Position/Title _____

Dates (month/year):__ from _____ to _____

2. **Name of Employer** _____

Location (city/country) _____

Position/Title _____

Dates (month/year):__ from _____ to _____

3. **Name of Employer** _____

Location (city/country) _____

Position/Title _____

Dates (month/year):__ from _____ to _____

11. List other graduate schools you are applying for (if any).

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12. List the major previous scholarships and fellowships you have held both as a graduate and as an undergraduate student.

1. Award Title _____

Institution _____ Dates or Academic Year _____

2. Award Title _____

Institution _____ Dates or Academic Year _____

3. Award Title _____

Institution _____ Dates or Academic Year _____

13. List major academic recognition, honors, and memberships.

14. List the names of the people who will be submitting letters of recommendation. Ask the recommenders to use your full name as it appears on your application.

1. Name _____ **Title** _____

Institution _____

Location (city/country) _____

2. Name _____ **Title** _____

Institution _____

Location (city/country) _____

3. Name _____ **Title** _____

Institution _____

Location (city/country) _____

15. Person to be notified in applicant's home country in case of emergency

Name _____

Address _____

Phone Number _____ Relationship _____

16. I certify that I have read all instructions and that information in this application is true and complete. I understand that misrepresentation may be cause for cancelation of my admission. I understand that all credentials and documents I submit become the property of YNU.

Print Name _____

Signature _____ **Date** _____

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MASTER'S PROGRAM IN PUBLIC POLICY AND TAXATION

YOKOHAMA NATIONAL UNIVERSITY

STATEMENT OF PURPOSE (1,200 words or less)

Please type or print.

Print Name_____

Signature_____

Date_____

For Admission in 2026-2027 Academic Year

RECOMMENDATION FOR ADMISSION
MASTER'S PROGRAM IN PUBLIC POLICY AND TAXATION
YOKOHAMA NATIONAL UNIVERSITY

Applicant's name (type of print): _____

Family

First

Middle

Note to applicant: Write your name and give this form with an envelope provided to the recommender.

To the recommender: Please complete and sign this form, and seal it in the envelope provided. To ensure confidentiality, please sign in the space designated over the flap of the sealed envelope before returning this form to the applicant.

In addition to responding to the items below, please comment specifically on the applicant's strengths and limitations for graduate study. Please use the back side of this form for your comment or attach a letter. If you do not wish to use this form, please include the full name of the student as it appears above to ensure that your recommendation will be added to the correct applicant file.

1. How long and in what capacity have you known the applicant?

2. Please rate the applicant in comparison with others whom you have known at similar stages in their careers.

	Exceptional	Outstanding	Very Good	Good		No Basis
	Upper 5%	Next 15%	Next 15%	Next 15%	Next 50%	for Judgment
Knowledge in the field of economics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation and perseverance toward goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to show thoughts in speech/writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to plan and conduct research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. This program requires the scholars to attend the Practicum at the National Tax Agency every week. Does the applicant have appropriate academic background and/or practical experience in the field of taxation?

Academic background: ☐ Yes ☐ No ☐ I don't know

Work Experience: ☐ Yes ☐ No ☐ I don't know

4. Please indicate the strength of your overall endorsement by placing an "X" along the scale.

☐☐☐☐

Highly recommended

Recommended

Recommended with some reservations

Not Recommended

Print Name _____

Signature _____

Date _____

Title _____ **Institution** _____

Address _____

Phone Number _____

E-Mail _____

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Signature _____

Date _____

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Address _____

Phone Number _____

E-Mail _____

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Print Name _____

Signature _____

Date _____

Title _____ **Institution** _____

Address _____

Phone Number _____

E-Mail _____