

2020 Tokyo Medical and Dental University (TMDU), Graduate School of Medical and Dental Sciences,  
University of Chile and TMDU Joint Degree Doctoral Program in Medical Sciences with mention of a medical specialty

### Admission Ticket for Examination

|                     |  |        |                                                                                                                                                                                                                                                                |
|---------------------|--|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| *Application Number |  |        | <div style="border: 1px dashed black; padding: 10px; text-align: center;"> <b>Photograph</b><br/> <small>Paste a 4 x 3 cm photograph taken within the past 3 months. Write your name and nationality in block letters on the back of the photo.</small> </div> |
| In Roman Alphabet   |  | Male   |                                                                                                                                                                                                                                                                |
| Name of Applicant   |  | Female |                                                                                                                                                                                                                                                                |

\* Please do not forget to bring this Admission Ticket for Examination on the examination day.

[ Examination date (April admission): January th, 2020( day) ]

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### Photo sheet

|                     |          |             |                                                                                                                                                                                                                                                                |       |                           |
|---------------------|----------|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|---------------------------|
| *Application Number |          |             | <div style="border: 1px dashed black; padding: 10px; text-align: center;"> <b>Photograph</b><br/> <small>Paste a 4 x 3 cm photograph taken within the past 3 months. Write your name and nationality in block letters on the back of the photo.</small> </div> |       |                           |
| In Roman Alphabet   |          | 男<br>Male   |                                                                                                                                                                                                                                                                |       |                           |
| Name of Applicant   |          | 女<br>Female |                                                                                                                                                                                                                                                                |       |                           |
| Date of Birth       | A.D Year | Month       | Day                                                                                                                                                                                                                                                            | (Age) | [Age as of April 1, 2020] |