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Kobe College Corporation  
Japan Education Exchange

## *Graduate Fellowship Program Application*

### *Institutional Certification Form*

This is to certify that \_\_\_\_\_  
*(Name of Applicant)*

is a graduate student enrolled in good standing at

\_\_\_\_\_  
*(Name of Institution)*

Degree Expected \_\_\_\_\_

Expected Date of Graduation \_\_\_\_\_

Name (printed or typed) \_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

E-mail address \_\_\_\_\_

Phone number \_\_\_\_\_

Date \_\_\_\_\_

**Important: A candidate's application will be considered incomplete, and therefore ineligible for consideration, without completion of this form by a university representative (department chair, graduate dean, or dissertation director). Applicants must be currently enrolled in a graduate program. Return this form with the completed application.**