

Toyama City Institute of Glass Art
Advanced Research Studies Program
2015 Application Information

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2015 Application Information

1. A. R. S. PROGRAM

Advanced Research Studies Program. The ARS program is a 2 year research course with a total of 8 students. Each year TIGA accepts only 4 applicants to the 1st year A. R. S. class.

2. ELIGIBILITY

Conditions for application are;

- (a) Previous completion of an undergraduate course of study with an emphasis in glass.
- (b) An equivalent experience outside of academia. (ie. individual studio work)

3. APPLICATION DEADLINE

Applications for the 2015 term must be received between Oct. 20 and Nov.10 in 2014.

Please mail all requested materials together in one package to the address on the following page.

4. APPLICATION REQUIREMENTS

- (a) application form
- (b) CD portfolio of your work (15 or more slides in jpeg format on CD-ROM)
- (c) one recommendation
- (d) copy of undergraduate diploma or equivalent
- (e) 3 passport size photos (4.5cm×3.5cm) : all of the same image
 - *Please attach one of them to application form and enclose others.
- (f) transcript
- (g) letter form a physician certifying your health status
- (h) application fee ; ¥ 18,000- (Payment must be made by international postal money order, in Japanese funds. International postal money order will take 2-3weeks to process, so please include a copy of your receipt.)

[Please be sure to send your application package by certified mail. Also you must enclose a self addressed envelopes(S.A.E.) for the return of your result notification.]

5. INTERVIEW

We will make an interview by internet (with Skype, ichtat...) or telephone. We will contact with the applicants in advance to arrange the date and time for the interview. (All interviews must take place before Nov. 29, 2014)

6. NOTIFICATION

Applicants will be notified of the status of their applications after jury has been held on Dec. 8, 2014.

7. ENTRANCE FEE

Accepted applicants must submit an initial deposit fee of ¥169,200- by Dec.19, 2014.

PLEASE NOTE

This fee is non-refundable.

This entrance fee is a deposit to confirm your position in class, accompanied with your letter of confirmation of acceptance.

If it is not received by Dec.19,2014, your acceptance will be cancelled.

8. VISA

We will apply for your “certificate of eligibility” which you will need for your visa application, and we will send it to you. Once you receive it, you should apply for your student visa at the Japanese Embassy in your country as soon as possible. Please ask about the procedure and the requirements for your visa at your local Japanese Embassy.

PLEASE NOTE important

You will need to send us the certificate of specific level of Japanese language ability to apply for the “certificate of eligibility”. This is based on the requirement of the Japanese immigration office. All applicants should inquire at their local Japanese Embassy concerning this and other requirements before applying to this school.

9. TUITION

¥390,000- (one year)

10. HOUSING

The school is able to provide a dormitory for students upon availability.

Please ask us for further information, if you are interested in school housing.

11.FINANCIAL AID

No scholarships or assistantships from TIGA are available.

12.CONTACT

Toyama City Institute of Glass Art

80 Nishikanaya, Toyama

930-0143 Japan

phone (day): (+81)-76-436-2973

fax: (+81)-76-436-2974

e-mail: officetiga@song.ocn.ne.jp

ADVANCED RESEARCH STUDIES PROGRAM 2015 APPLICATION FORM
TOYAMA CITY INSTITUTE OF GLASS ART

NAME	last	first	middle	PHOTO
CURRENT ADDRESS	street	city		
	state	zip code	country	
PERMANENT ADDRESS	street	city		
	state	zip code	country	
PHONE	day	night	E-MAIL	
NATIONALITY	DATE OF BIRTH			AGE
		month	day	year
Do you suffer from any physical disability ?		HEIGHT	cm	WEIGHT
<input type="checkbox"/> YES <input type="checkbox"/> NO				
If yes, please explain.				
EDUCATION				
OCCUPATIONAL EXPERIENCE				
EXHIBITIONS, SCHOLARSHIP, AWARDS				

Date _____ Signature _____

A LETTER OF RECOMMENDATION
TOYAMA CITY INSTITUTE OF GLASS ART

last

first

middle

NAME OF APPLICANT _____

ADDRESS _____

Please state below your opinion of the applicant's background, character, personal qualities and his/her ability to carry on advanced study and research.

Please explain briefly the relation between you and the applicant above.

DATE _____ SIGNATURE _____

INSTITUTION _____ PRINT NAME _____

ADDRESS _____ POSITION _____