

# Application Form - Clinical Elective Program at Keio University School of Medicine (June 2026 - June 2027)

 **Please go to the next page to start filling out the application form** 

\* 必須の質問です

1。 メールアドレス \*

2。 Are you a nominated student from your home institution? \*  
Please see the number 1 of the "Eligibility Requirements": <https://www.med.keio.ac.jp/en/admissions/clinical-elective/index.html>

1 つだけマークしてください。

☐ Yes

☐ No

## Personal Information

3。 First Name \*

4。 Middle Name

5。 Last Name \*

6。 Email Address \*

7。 Telephone Number (+Country No. - Telephone number) \*  
e.g. +86-3-3353-1211

8。 Home Address \*

9。 Date of Birth (YYYY/MM/DD) \*

例: 2019 年 1 月 7 日

10。Gender \*

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☐ Male

☐ Female

11。Nationality \*

12。Year (must be the final year, please write for example "6th/6th") \*

13。Japanese Proficiency

1 つだけマークしてください。

☐ None

☐ Beginner

☐ Intermediate

☐ Native/Fluent

Emergency Contact Information

14。First Name \*

15。Middle Name

16。Last Name \*

17。Email Address \*

18。Telephone Number (+Country No. - Telephone number) \*  
e.g. +86-3-3353-1211

19。Relationship to Student \*

Home Institution

20。

University Name

\*

Please check if your institution's name is listed in the below list: "[Other Partner Institutions](#)".

21。

Country

\*

22。

Address

\*

23。

University (Exchange) Coordinator's Name

\*

24。

The Coordinator's Email

\*

25。

The Coordinator's Telephone Number (+Country No. - Telephone number)

\*

e.g. +86-3-3353-1211

Program Request

- (1) Please list the departments in order of your preference according to the "Clinical Department List & Schedule" (**Be sure to list 6 preferences**) .
- (2) Please choose the block and fill out the period based on the "[Clinical Department List & Schedule](#)" in order of your preference with a minimum of 1 to a maximum of 3. Please select preferred block schedule as much as possible.

26。

(1) Clinical Department: Preference 1 \*

Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
- ☐ Gynecology
- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine

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(1) Clinical Department: Preference 2 \*

⌵ Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
- ☐ Gynecology
- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine

28。

(1) Clinical Department: Preference 3 \*

Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
- ☐ Gynecology
- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine

29。

(1) Clinical Department: Preference 4 \*

⌵ Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
- ☐ Gynecology
- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine

30。(1) Clinical Department: Preference 5 \*

Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
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- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine



31。

(1) Clinical Department: Preference 6 \*

⌵ Dropdown

1 つだけマークしてください。

- ☐ Pulmonary Medicine
- ☐ Cardiology
- ☐ Gastroenterology and Hepatology
- ☐ Nephrology, Endocrinology and Metabolism
- ☐ Neurology
- ☐ Rheumatology
- ☐ General and Gastroenterological Surgery
- ☐ General Thoracic Surgery
- ☐ Cardiovascular Surgery
- ☐ Neurosurgery
- ☐ Pediatric Surgery
- ☐ Orthopedic Surgery
- ☐ Rehabilitation Medicine
- ☐ Plastic and Reconstructive Surgery
- ☐ Pediatrics
- ☐ Obstetrics
- ☐ Gynecology
- ☐ Ophthalmology
- ☐ Dermatology
- ☐ Urology
- ☐ Otorhinolaryngology, Head and Neck Surgery
- ☐ Neuropsychiatry
- ☐ Radiation Oncology
- ☐ Diagnostic Radiology
- ☐ Anesthesiology
- ☐ Emergency and Critical Care Medicine
- ☐ Cancer Center
- ☐ Center for Kampo Medicine

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(2) Elective Period: Preference 1

⌵ Dropdown

1 つだけマークしてください。

- ☐ Block 1 (2026/6/22 - 2026/7/17)
- ☐ Block 2 (2026/8/10 - 2026/9/4)
- ☐ Block 3 (2026/9/14 - 2026/10/9)
- ☐ Block 4 (2026/10/19 - 2026/11/13)
- ☐ Block 5 (2026/11/24 - 2026/12/18)
- ☐ Block 6 (2027/1/12 - 2027/2/5)
- ☐ Block 7 (2027/2/15 - 2027/3/12)
- ☐ Block 8 (2027/4/5 - 2027/4/30)
- ☐ Block 9 (2027/5/17 - 2027/6/11)

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(2) Elective Period: Preference 2

⌵ Dropdown

1 つだけマークしてください。

- ☐ Block 1 (2026/6/22 - 2026/7/17)
- ☐ Block 2 (2026/8/10 - 2026/9/4)
- ☐ Block 3 (2026/9/14 - 2026/10/9)
- ☐ Block 4 (2026/10/19 - 2026/11/13)
- ☐ Block 5 (2026/11/24 - 2026/12/18)
- ☐ Block 6 (2027/1/12 - 2027/2/5)
- ☐ Block 7 (2027/2/15 - 2027/3/12)
- ☐ Block 8 (2027/4/5 - 2027/4/30)
- ☐ Block 9 (2027/5/17 - 2027/6/11)

34。

(2) Elective Period: Preference 3

⌵ Dropdown

1 つだけマークしてください。

- ☐ Block 1 (2026/6/22 - 2026/7/17)
- ☐ Block 2 (2026/8/10 - 2026/9/4)
- ☐ Block 3 (2026/9/14 - 2026/10/9)
- ☐ Block 4 (2026/10/19 - 2026/11/13)
- ☐ Block 5 (2026/11/24 - 2026/12/18)
- ☐ Block 6 (2027/1/12 - 2027/2/5)
- ☐ Block 7 (2027/2/15 - 2027/3/12)
- ☐ Block 8 (2027/4/5 - 2027/4/30)
- ☐ Block 9 (2027/5/17 - 2027/6/11)

35。

(2) As a general rule, we accept students according to the predetermined blocks, however, if none of the preformed block schedule fits, please specify the preferred dates (YYYY/MM/DD - YYYY/MM/DD).  
Please note that we cannot guarantee acceptance on your preferred dates.

36。

Please provide us er reason for your answer above.

- 37。(2) Weeks of your preference\*
- \*Only if you are a nominated student from the partner institution that has "School of Medicine" level of agreement, you are applicable to choose "Other".
- 1 つだけマークしてください。
- ☐ 2 weeks

☐ 4 weeks

☐ その他: \_\_\_\_\_

Housing Request

- 38。Daikyocho Residence:\*
- It is the residence operated by Keio University School of Medicine. Please answer yes or no if you need a room.
- \*Please note that even if you choose "yes", it may not always be what you request since there are only 6 private rooms available in the residence. In that case, students may need to book accommodation by themselves. Some recommended apartment/ hotel near Shinanomachi Campus are informed upon your request to our office by email.
- 1 つだけマークしてください。
- ☐ Yes

☐ No

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