

Application Form - Clinical Elective Program at Keio University School of Medicine (June 2025 - June 2026)

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

* Indicates required question

1. Email *

Personal Information

2. First Name (Taro) *

3. Middle Name

4. LAST NAME (KEIO) *

5. Email Address *

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

7. Home Address *

8. Date of Birth (YYYY/MM/DD) *

9. Gender *

Mark only one oval.

☐ Male

☐ Female

10. Nationality *

11. Year (must be the final year, please write for example "6th/6th") *

Emergency Contact Information

12. First Name (Hanako) *

13. Middle Name

14. LAST NAME (KEIO) *

15. Email Address *

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

17. Relationship to Student *

Home Institution

18. University Name *
Please check if your institution's name is listed in the below list:
"[University-Wide Student Exchange Partner Institutions](#)" or "School of Medicine" level of agreement in "[Other Partner Institutions](#)".

19. Country *

20. Address *

21. University (Exchange) Coordinator's Name *

22. The Coordinator's Email *

23. 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.**

24. (1) Clinical Department: Preference 1 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

25. (1) Clinical Department: Preference 2 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

26. (1) Clinical Department: Preference 3 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

27. (1) Clinical Department: Preference 4 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

28. (1) Clinical Department: Preference 5 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

29. (1) Clinical Department: Preference 6 *

Mark only one oval.

- ☐ 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
- ☐ Institute for Integrated Sports Medicine
- ☐ Center for Kampo Medicine

30. (2) Elective Period: Preference 1

Mark only one oval.

- ☐ Block 1 (2025/6/23 - 2025/7/18)
- ☐ Block 2 (2025/8/18 - 2025/9/12)
- ☐ Block 3 (2025/9/22 - 2025/10/17)
- ☐ Block 4 (2025/10/27 - 2025/11/21)
- ☐ Block 5 (2025/12/1 - 2025/12/26)
- ☐ Block 6 (2026/1/13 - 2026/2/6)
- ☐ Block 7 (2026/2/16 - 2026/3/13)
- ☐ Block 8 (2026/4/6 - 2026/5/1)
- ☐ Block 9 (2026/5/18 - 2026/6/12)

31. (2) Elective Period 2: Preference 2

Mark only one oval.

- ☐ Block 1 (2025/6/23 - 2025/7/18)
- ☐ Block 2 (2025/8/18 - 2025/9/12)
- ☐ Block 3 (2025/9/22 - 2025/10/17)
- ☐ Block 4 (2025/10/27 - 2025/11/21)
- ☐ Block 5 (2025/12/1 - 2025/12/26)
- ☐ Block 6 (2026/1/13 - 2026/2/6)
- ☐ Block 7 (2026/2/16 - 2026/3/13)
- ☐ Block 8 (2026/4/6 - 2026/5/1)
- ☐ Block 9 (2026/5/18 - 2026/6/12)

32. (2) Elective Period 3: Preference 3

Mark only one oval.

- ☐ Block 1 (2025/6/23 - 2025/7/18)
- ☐ Block 2 (2025/8/18 - 2025/9/12)
- ☐ Block 3 (2025/9/22 - 2025/10/17)
- ☐ Block 4 (2025/10/27 - 2025/11/21)
- ☐ Block 5 (2025/12/1 - 2025/12/26)
- ☐ Block 6 (2026/1/13 - 2026/2/6)
- ☐ Block 7 (2026/2/16 - 2026/3/13)
- ☐ Block 8 (2026/4/6 - 2026/5/1)
- ☐ Block 9 (2026/5/18 - 2026/6/12)

33. (2) If none of the preformed block schedule fits, please specify the preferred dates (YYYY/MM/DD - YYYY/MM/DD).

*Only if you are a nominated student from the partner institution that has "School of Medicine" level of agreement, you are applicable to this section. Otherwise, you must select the pre-defined block schedule above.

34. (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".

Mark only one oval.

- ☐ 2 weeks
- ☐ 3 weeks
- ☐ 4 weeks
- ☐ Other:

35. 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.

Mark only one oval.

☐ Yes

☐ No

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