

**THE ALLIANCE ON BUSINESS EDUCATION AND SCHOLARSHIP FOR TOMORROW, a 21st century organization**

**5-4-29, Minami-aoyama, Minato-ku, Tokyo 107-0062, JAPAN**

**TEL: +81(3)3498-6220 FAX: +81(3)3498-6221 http://www.abest21.org/**

**2024**

**Full School Membership Application Form**

Thank you for applying for the ABEST21 International School Membership. A Full School Membership is for educational institutions actively involved in management education on a global basis. Annual School Membership Fee is JY 120,000 yen. Please print all information.

**I. Basic Information**

**1. Name of University:**

Name of University:

Name of Rector:

**2. Types of the University:**

Please tick types of the University

□State University □Public University □Private University

**3. Name of the Academic Unit (Faculty or School) applied to the Membership**:

Name:

Postal Address:

Tel. and Fax:

www.

**4. Dean of the Academic Unit:**

Name:

Position:

Email:

**5. The University and the Academic Unit’s Profile**

 Provide the University and the Academic Unit’s Profile using **Sheet-1** within one page maximum.

**6. Year of founding**

|  |  |  |
| --- | --- | --- |
| Year of founding | University | Academic Unit |
|  |  |

**7. Total Number of Students and Faculty members**

|  |  |  |
| --- | --- | --- |
|  | Students | Faculty members |
| University |  |  |
| Academic Unit |  |  |

**II. Educational Programs**

1. **The Academic Unit’s Educational Programs**

Provide the Academic Unit’s Educational Programs using **Sheet-2** within one page maximum.

1. **Degree Programs offered by the Academic Unit**

|  |  |
| --- | --- |
|  | Name of Degree programs offered |
| Bachelors’ Degree programs |  |
| Masters’ Degree programs |  |
| Doctoral Degree programs |  |

**III. Recommendation Letter**

 Attach a recommendation letter from a delegate of ABEST21 International Full School members.

**IV. Supplement Information**

1. The University and the Academic Unit’s Profile
2. The Academic Unit’s Educational Programs
3. Recommendation Letter

**The undersigned certify the accuracy of the information provided.**

**The Dean’s Name and Signature Date**

**The President’s Name and Signature** **Date**

For questions or assistance in completing this form, please contact ABEST21 International.

The Membership Application should be submitted to ABEST21 International Office. Please submit the application via email to abest21international@abest21. org.

Contact Information

ABEST21 International

5-4-29, Minami Aoyama, Minato-ku, Tokyo 107-0062, JAPAN

Phone: +81-3-3498-6220/ Fax: +81-3-3498-6221/ EMAIL: abest21international@abest21. org

**Sheet-1: The University and Academic Unit’s Profile**

**Sheet-2: The Academic Unit’s Educational Programs**

**Sheet-3: Recommendation Letter**