



WORK OFFER

Ref. No. JP-2020-56UTK

Employer Information

Location of placement: Tokyo
Nearest airport: Haneda, Narita
Working hours per week: 40.0
Working hours per day: 8.0

Student Required

General Discipline: 04-ARCHITECTURE
14B-CIVIL ENGINEERING, GEOLOGY AND MINING
Completed years of study: 4

Field of Study: 04.0301-City/Urban, Community and Regional Planning.
14.0804-Transportation and Highway Engineering.
Student status requirements: required during whole internship period.

Language required: English Excellent

Required Knowledge and Experiences:
Basic knowledge about transportation and/or urban planning

Other requirements:
Trainee should research independently as well as perform given tasks. Communication skills with other members

Work Offered

Trainee is expected to join a research project relating to transportation/urban planning with other members in the lab. The details of work will be determined through discussions with supervisor. He/she is required to come to lab room every weekday and to have face-to-face regular meetings with other members and supervisor. At the end of training period, he/she is required to submit a final report to the supervisor and to make a presentation about achievements during the internship period.

Number of weeks offered: 8 - 12
Within the months: 01-JUN-2020 - 30-OCT-2020
Or within: -
Company closed within: -

Working environment: Research and development
Gross pay: 69000 JPY / Month
Deduction to be expected: 0
Payment method / time of first payment: Cash / monthly, first payment will be after two weeks of starting date

Latest possible start date: 03-AUG-2020

Accommodation

Canteen at work: Yes
Expected type of accommodation: Apartment

Accommodation will be arranged by: IAESTE Japan

Estimated cost of lodging: 0 JPY / Month
Estimated cost of living incl. lodging: 50000 JPY / Month

Additional Information

Health Certificate required.
Lodging will be shared apartment with private bedroom.
Commuter train expenses will be paid by the employer.

Nomination Information

Deadline for nomination: 15-MAR-2020

Date: 30-JAN-2020 *On behalf of receiving country:* Keiichi Tsumagari

CERTIFICATE OF HEALTH (健康診断証明書)

出願者氏名 Name of Applicant _____ (First Name) (Middle Name) (Last Name)		性別 Sex M・F	生年月日 Date of Birth _____ (Day) (Month) (Year)	年齢 Age
国籍 Nationality	現住所 Present Address			
身長(cm) 体重(kg) Height _____ Weight _____		内科 Physical Examination 所見 Findings		
視力 裸眼 矯正 Eyesight With glasses Corrected 右 Right _____ _____ 左 Left _____ _____				
色覚 Colour Vision				
聴力 右 Right 左 Left Hearing _____ _____				
血圧 Blood Pressure / mmHg		既往症 Previous Illness		
胸部 X 線検査 Chest X-ray 所見 Findings				
検尿 Urinalysis 蛋白質 糖 鏡検所見 Protein Sugar Microscopic _____ _____ _____		備考 Remarks		
総括的健康状態 General State of Physical Condition 優 良 可 不可 Excellent Good Fair Poor				
診断日 Date of Report _____ (Day/Month/Year)				
医療機関名 および所在地 Name and Address of Medical Facility _____				
医師署名 Signature of Physician _____				
医師名 Name (Type or Print) _____				