



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
Working environment: Research and development
Within the months: 01-JUN-2020 - 30-OCT-2020
Gross pay: 69000 JPY / Month
Or within: -
Deduction to be expected: 0
Company closed within: -
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
Estimated cost of lodging: 0 JPY / Month
Accommodation will be arranged by: IAESTE Japan
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) Height _____ 体重(kg) Weight _____	内科 Physical Examination 所見 Findings			
視力 Eyesight 裸眼 With glasses 矯正 Corrected 右 Right _____ 左 Left _____				
色覚 Colour Vision				
聴力 Hearing 右 Right _____ 左 Left _____	既往症 Previous Illness			
血圧 Blood Pressure _____ / _____ mmHg				
胸部 X 線検査 Chest X-ray 所見 Findings				
検尿 Urinalysis 蛋白質 Protein _____ 糖 Sugar _____ 鏡検所見 Microscopic _____	備考 Remarks			
総括的健康状態 General State of Physical Condition 優 Excellent 良 Good 可 Fair 不可 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) _____				