

Approval of Examination and Attendance

(For non-standard applicants working in Japan on.y)

(i)
Sample

Applicants who fall under any of the following are required to submit this form.

1. Applicants who are employed at the time of applying for graduate school and will continue to work in Japan at the time of entering graduate school
2. Applicants who are not employed at the time of applying for graduate school and plan to work in Japan after entering graduate school (※Please submit this form as soon as you start working.)

Date: (DD MM YYYY)

To Dean, Nagasaki University Graduate School of Biomedical Sciences

Address of organization: 1-7-1 Sakamoto, Nagasaki City

Name of organization: Nagasaki University Hospital

Name of its representative: Hospital Director ■ ■ ■ ■

Signature/Seal

I approve of the individual named below to take the admission examination for Nagasaki University Graduate School of Biomedical Sciences and providing he/she is accepted to the school, I guarantee his/her remaining as an employee of this organization during the duration of the course.

Name Taro Nagasaki

Date of birth 0/0/1979
(DD MM YYYY)

Current address 1-14 Bunkyo, Nagasaki City

Position Resident