(外国人留学生入試用)

Examinee Number	*
Examinee Number	

* For office use only

Letter of Approval (受験承認書)

To : The President of Kitami Insti	itute of Techn	ology			
Full	l Name of A	Applicant			
Des	sired Course	of Study			
I approve the above named loctoral program of the Gradu Technology. His/Her status will	ate School o	f Engineeri	ng, Kit	ami Insti	
			(Year)	(Month)	(Day)
Authorizing Official Title and Affiliation	ı				
Full Name					_
Signature					

Signature is not necessary when you put your personal seal above.