4

Examinee Number	*

* For office use only

Letter of Approval (受験承認書)

To: The President of Kitami	Institute of Techno	logy			
	Full Name of A	pplicant			
	Desired Course	of Study			
I approve the above na doctoral program of the Gr Technology. His/Her status	aduate School of	Engineeri	ng, Kit	ami Inst	
			(Year)	(Month)	(Day)
Authorizing Officia Title and Affilia		_			
Full Name					
Signature	-				

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