Withdrawal Request

Date (yyyy, mm, dd):

To the President of the University of Yamanashi

Affiliation (e.g. faculty, graduate school, department

/ course of study, department, major, etc.)

, ,

		Student number	
		Name	seal
		[Guaranter] Full Name	seal
(Reason) 1. Illness 2. Injury	I w	ould like to withdraw from the university	to
 Due to personal reason Due to family reason 		request that you permit me to do so, with a separate let	[1. Doctor's certificate ter[2. Statement of reason
Address for sending t	he withdra 〒	wal permit TeL	
Opinion of your depar	tment/grad	luate school/faculty(see Note 1)所属学部	『・大学院・専攻科の所見
		氏名	印
Opinion of the Academ	ic Student	:Committee members (only for Engineering 学域学生委	students). 員の所見(工学部学生のみ)
		氏 名	印
Tuition fee payment s 令和 年度	tatus 授業 期(分綱	料納入状況(会計課・管理課または学生支援語 物により 月分 円)まで	
令和 年	月 日	授業料等徴収事務担当者	印
令和 年度	期 全	≧額免除・半額免除・休学	
令和 年	月 日	授業料等免除(学部)事務担当者	印
Confirmation of your	department	al administrative officer 所属学部事務担当	当確認
令和 年 月		学部教務担当者	印
(Note 1) For the "Opinion following table of affilia		artment/graduate school/faculty", it should be obt	ained in accordance with the
Undergraduate/ Graduate school, of Faculty of Education and Human Sciences Faculy of Education Faculty of Medicine	Your cours Each depar	F r e of study C c	Persons in charge of filling in opinions or first-year students: the course epresentative or second-year students and above: the ourse representative or the teacher in harge of each department. mall class teacher
Faculty of Engineering Faculty of Life and Environmetal	Each depar Each depar		lead of department lead of department
Sciences Graduate school of Education Eac		>	<pre>%Head of department/course (must contact</pre>
	Master's	Department of Biomedical Science	upervisor first) lead of department
Graduate schools ODepartment of Education Interdisciplinary Graduate School Medicine and Engineering OIntegrated Graduate School of Medicine, Engineering, and Agricultural Sciences	course	Department of Life and Environmental Science s Medical Sciences Field, Department of Human Health Care Studies, Human Environment and Biomedical Engineering Department, Bioenvironmental Studies Course/Medical Sciences, Department of S Human Health Care Sciences, Integrated Applied Biosciences Department,Biomedical Sciences Courses Engineering Field, Department of Human Environment and Biomedical Engineering, Bioinformation Systems Course. S Department of Engineering, Integrated Applied Biosciences, Life S	KHead of department/course (must contact upervisor first) KHead of department/course (must contact upervisor first) KHead of department/course (must contact upervisor first)
Special Advanced Program in Specia Support Education	Each cours		presentative of course
	c.' refers to th	e representative teacher of the department or discipline to which y	rou belong.

(Note 3) When submitting an application for withdrawal, the student's ID must be attached.