Readmission Request

, ,

Date (yyyy, mm, dd): To the President of the University of Yamanashi

		Name	seal/signature
	Student number before withdrawal		
		Crrent address	
		[Guaranter] Full Name	seal/signature
(Reason) Illness I have withdrawn from the university 			
 Injury 	1 110		would like to readmit
3. Due to personal reaso	n as i		sk that you permit me to
4. Due to family reason	45	so, with the attached statement of reas	
[Admission year and month: , , Past department etc. :			
Address for sending re-admission permit			
Contact details after receipt of re-admission permit			
Opinion of your department/graduate school/faculty (see Note 1) 所属学部・大学院・専攻科の所見			
		氏名	印
Opinion of the Academic Student Committee members (only for Engineering students). 学域学生委員の所見(工学部学生のみ)			
		氏名	印
Examination fee payment status (accounting and administration sections)令和 年 月 日 納入済検定料納入状況 (会計課・管理課)授業料等徴収事務担当者印			
令和 年 月	日	学部教務担当者	印
(Note 1) For the "Opinion of your department/graduate school/faculty", it should be obtained in accordance with the following table of affiliation.			
Undergraduate/ Graduate school, etc.		Course, Department, Division, Major, etc.	Persons in charge of filling in opinions For first-year students: the course representative
Sciences Faculy of Education	Your course	of study	For second-year students and above: the course representative or the teacher in charge of each department.
Faculty of Medicine Faculty of Engineering	Each departm Each departm		Small class teacher Head of department
Faculty of Life and Environmetal Sciences	Each departm	ient	Head of department
Graduate school of Education	Each course		<pre>%Head of department/course (must contact supervisor first)</pre>
	Master's <u>C</u>	lepartment of Biomedical Science lepartment of Nursing Science	Head of department
Graduate schools ODepartment of Education	0	lepartment of Engineering lepartment of Life and Environmental Science	※Head of department/course (must contact supervisor first)
Interdisciplinary Graduate School of Medicine and Engineering OIntegrated Graduate School of Medicine, Engineering, and	Poctor's	ledical Sciences Field, Department of Human Health Care Studies, luman Environment and Biomedical Engineering Department, lioenvironmental Studies Course/Medical Sciences, Department of luman Health Care Sciences, Integrated Applied Biosciences lepartment, Biomedical Sciences Courses	Supervisor
Agricultural Sciences	Course E C	ingineering Field, Department of Human Environment and liomedical Engineering, Bioinformation Systems Course. lepartment of Engineering, Integrated Applied Biosciences, Life und Agricultural Sciences Course and Biotechnology Course.	<pre>%Head of department/course (must contact supervisor first) %Head of department/course (must contact supervisor first)</pre>
Special Advanced Program in Special Support Education	Each course		Rpresentative of course
☆Ine term 'head of department, etc.' re	ters to the	representative teacher of the department or discipline to which	you belong.