

# 休学願

Application for leave of absence

Current date (Year-Month-Day)  
\_\_\_\_年\_\_月\_\_日

筑波大学大学院 理工情報生命学術院長 殿

Please circle the corresponding item.  
(入学 enrollment; 編入学 transfer to a doctoral program;  
転入学 transfer from another university; 再入学 readmission)

Student's information

本人 入学年度 \_\_\_\_\_年度 (入学) 編入学、転入学、再入学)  
Program and grade year 所属・年次 理工情報生命学術院

Type of program

Program name \_\_\_\_\_ 学位プログラム 第\_\_\_\_年次  
博士課程 (前期) 後期、一貫制)

Please circle the corresponding item.  
(前期 Master's program;  
後期 3-year doctoral program;  
一貫制 5-year doctoral program)

Student's name and seal/signature

学籍番号 \_\_\_\_\_  
氏名 \_\_\_\_\_ 印 (Seal)

Current address 現住所 \_\_\_\_\_ 〒 (Postal code)

Telephone number 電話番号 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Mobile number 携帯番号 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

E-mail \_\_\_\_\_

International students may use their signature instead of a seal.

Scholarship status 奨学金受給状況 学生支援機構奨学金受給の有無 : 有 ・ 無 (有 Yes/無 No)  
Do you receive a scholarship from Japan Student Services Organization (JASSO)?

その他奨学金 (奨学金名) : \_\_\_\_\_  
Scholarship from other organizations (Please identify the name of the scholarship program.)

下記により休学いたしたくご許可くださるようお願いいたします。

I hereby request permission to take a leave of absence as indicated below.  
記

1 Reason for applying for a leave of absence

1 休学の事由

※病気療養の場合、医師の診断書を添付すること。 A medical certificate is required if the leave of absence is due to a health problem.

2 Requested leave of absence duration

2 休学の期間 Start date (Year-Month-Day) \_\_\_\_\_年\_\_月\_\_日から End date (Year-Month-Day) \_\_\_\_\_年\_\_月\_\_日まで

Previously approved leave of absence (if any)  
既休学期間 \_\_\_\_\_年\_\_月\_\_日から \_\_\_\_\_年\_\_月\_\_日まで  
\_\_\_\_\_年\_\_月\_\_日から \_\_\_\_\_年\_\_月\_\_日まで  
\_\_\_\_\_年\_\_月\_\_日から \_\_\_\_\_年\_\_月\_\_日まで

3 Student's contact during the leave of absence

3 休学中の連絡先 (本人) Address 住所 : 〒 (Postal code) \_\_\_\_\_  
Telephone number 電話番号等 : \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
E-mail \_\_\_\_\_

4 Emergency contact (Resident of Japan)

4 緊急時の連絡先 (本人以外の国内在住者) Relationship with the student  
Name 氏名 \_\_\_\_\_ 続柄 \_\_\_\_\_  
Address 住所 〒 (Postal code) \_\_\_\_\_  
Telephone number 電話番号 \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

International students are also required to submit the following documents:

- 休学・退学・除籍者情報シート (Information on a student leaving the University)
- Photocopy of their residence card (both sides)

学位プログラムリーダー 確認印	指導教員 確認印	授業料 確認印	
(Seal of the Chair of the program)	(Seal of the supervising faculty member)	前 期	後 期