Application Form for the Issue of Certificates

Year Month Day

Applicant	☐ The applicant ☐ A family member ☐ Someone other than a family member ( )
Applicant's name	㊞
Applicant's address and Contact Details	〒 Tel (a number where you can be contacted during the day) — —

* Please tick the relevant box.

*If the application is being made by someone other than the applicant, a letter of authorisation from the applicant is required.

Full Name				
Date of Birth	Year Month Day		Student ID number (leave blank if unknown)	
Graduating Institution	Eikei University of Hiroshima, Department of Social System Design			
Date of Enrolment	Year Month Enrolled		*To be completed by the Administration Office: Date of graduation (· ·)	
Date of Graduation	Year Month Graduation			
Type of certificate and number of copies		Japanese	English	Intended use
	☐ Certificate of Graduation	copies	copies	☐ Employment
	☐ Academic Transcript	copies	copies	☐ Further education
	☐ Certificate of Attendance	copies	copies	☐ License application
	☐ Other ( )	copies	copies	☐ Other ( )
Sealed	☐ Not required	☐ Required	When requesting two or more types of certificates ☐ Seal them all together in a single sealed envelope ☐ Seal them separately in individual sealed envelopes	