

Examination Permission

To: Dean of Graduate School of Frontier Science Initiative,
Kanazawa University

Hereby, _____ is granted permission to take the examination
for the Graduate School of Frontier Science Initiative, Kanazawa
University (Doctoral program).

Furthermore, if enrolled in the Graduate School of Frontier Science
Initiative of Kanazawa University, this student may remain employed
while enrolled.

Date:

(Affiliation/Job Title)

(Name)

Seal/Signature