別紙様式第4号の2（英文）（第5条関係）

(FORM 4)

REGISTRATION OF ADMISSION

President of Nagoya University

Applicant Name：

Signature：

Date：

(Month) 　 (Day) 　 (Year)

Please be informed that I had commenced residence in Nagoya University Residences for International Exchange.

|  |  |
| --- | --- |
| Name of Residence |  |
| Room Number |  |
| Date of Admission | (Month)　　　 　(Day)　 　　　 (Year) |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Residents | Date of Birth | Sex | Relationship |
|  | (Month)　 (Day)　 (Year) | Male・Female | Self |
|  | (Month) 　(Day) 　 (Year) | Male・Female |  |
|  | (Month) 　 (Day) 　 (Year) | Male・Female |  |
|  | (Month) 　 (Day) 　(Year) | Male・Female |  |