Application Form for Change of Supervisor

（指導教員変更願）

Month: /Date: /Year:

To: The Dean of the Graduate School of Humanities and Social Sciences

Specialization:

Student ID No:

Name: signature/seal

I would like to change my supervisor due to the following reasons.

Reasons:



 Current Supervisors: Primary Name: signature/seal

 Secondary Name: signature/seal

 Supervisors after Change: Primary Name: signature/seal

 Secondary Name: signature/seal

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| --- | --- | --- |
| 受付日 | 平成　 年　 月　 日 |  |
| 教授会承認日 | 平成　 年　 月　 日 |  |
| システム入力 | 平成　 年　 月　 日 |  |