

# Admission Guidelines for Auditors in the Faculty of Integrated Arts and Sciences, Tokushima University for the Academic Year 2026

## 1. Overview of the Program

Auditors may select and enroll in one or more courses offered by the faculty. Upon passing exams, auditors can officially earn credits. These credits may be recognized by Tokushima University or other universities if the auditor later enrolls as a regular student. Additionally, graduates of junior colleges or technical colleges may have these credits recognized when applying for a bachelor's degree through the National Institution for Academic Degrees and Quality Enhancement of Higher Education.

## 2. Requirements

Applicants must have the academic ability to achieve their educational goals.

## 3 Application Procedure

(1) Application Periods: Submit the application form and other required documents directly or by mail to the designated office.

First semester <April to August> Enrollment:

For international applicants who have not obtained a visa: The submission period is from Monday, November 17, 2025 to Friday, November 21, 2025.

For those other than the above: The submission period is from Monday, January 19, 2026 to Friday, January 23, 2026.

Second semester <October to February> Enrollment:

For international applicants who have not obtained a visa: The submission period is from Monday, May 18, 2026 to Friday, May 22, 2026.

For those other than the above: The submission period is from Monday, August 17, 2026 to Friday, August 21, 2026.

(2) Submission Address:

Japanese: 〒770-8502 徳島市常三島町1-1 徳島大学総合科学部事務課学務係  
Romaji: 770-8502 Tokushima-shi, Jyosanjima-cho 1-1, Tokushima Daigaku Sougoukagakubu Jimu-ka, Gakumugakari (Student Affairs Office of the Faculty of Integrated Arts and Sciences)

Phone: 088-656-7108

E-mail: [skgakumk@tokushima-u.ac.jp](mailto:skgakumk@tokushima-u.ac.jp)

(Refer to 1 on the Campus Map)

(3) Required Documents

|                                                    |                                                                                                                                                                                                                  |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Application Form:<br>(入学願書 <i>nyugakugan-sho</i> ) | ① Complete the attached form (annex form 1-3) and attach a recent (within the last 3 months) upper-body photograph (4 cm x 3 cm) taken without a hat.<br>② Obtain the approval stamp from the course instructor. |
|----------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                              |                                                                                                                                                                  |
|----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Letter of Acceptance<br>(承諾書 shoudaku-sho)                                                   | Submit if employed. (annex form 2)                                                                                                                               |
| Medical Certificate<br>(健康診断書 kenkoushinden-sho)                                             | Submit the attached form completed and sealed by a physician within 3 months prior to application. (annex form 3)                                                |
| Guarantee Form:<br>(保証書 hoshou-sho)                                                          | Not required for international students.                                                                                                                         |
| Code of Conduct Pledge Form<br>(誓約書 seiyaku-sho)                                             | Complete the attached form in the applicant's handwriting.                                                                                                       |
| Graduation Certificate<br>(卒業証明書 sotsugyou shoumei-sho)                                      | Submit a certificate from the most developed educational institution attended.                                                                                   |
| Return Envelope<br>(返信用封筒 Hen-shin you Fuutou)<br>(on request only)                          | For those requesting notification by mail within Japan, provide a standard-size envelope with the applicant's address and name, and affix the necessary postage. |
| Examination Fee<br>(検定料 kentei-ryou)                                                         | ¥9,800.<br><br>Confirm eligibility with the Academic Affairs Section and pay at the Josanjima Accounting Section. ( Jo-San Jima Kaikeika Keiri Gakari)           |
| Application for Certificate of Admission<br>(入学許可証明書交付願 Nyugaku kyoka shoumei-sho koufu-gan) | Submit if needed for visa acquisition.                                                                                                                           |
| Others                                                                                       | If requested by the university, please submit the necessary documents as needed.                                                                                 |

#### Note

- 1) Applications with incomplete documents will not be accepted. Attach a Japanese translation for any documents written in a foreign language.
- 2) Any certificates written in languages other than Japanese should have a Japanese translation attached.

#### 4 Enrollment Period

The beginning of each semester: April for the first semester, October for the second semester.

#### 5 Notification of Admission Results

Results will be notified via email. Provide your email address to the Academic Affairs Section. ([skgakumk@tokushima-u.ac.jp](mailto:skgakumk@tokushima-u.ac.jp)).

#### 6 Enrollment Procedure

##### (1) Expenses (as of June 1<sup>st</sup>, 2025)

- |                            |            |
|----------------------------|------------|
| ① Entrance Fee             | 28,200 yen |
| ② Tuition Fee (per credit) | 14,800 yen |

##### (2) Payment Period

- ① Entrance Fee: After admission is permitted by the end of March for Semester 1  
by the end of September for Semester 2
- ② Tuition Fee: by the end of April for Semester 1  
by the end of October for Semester 2

##### (3) Place of Payment

Jyosanjima Campus Accounting Office, Tokushima University 会計課経理係 (*kaikeika keiri gakkari*) 2-1 Minamijosanjima-cho, Tokushima 770-8506  
(Refer to 18 on the Campus Map)

##### (4) Payment Method

In principle, payments should be made in cash at the counter.

##### (1) Fees (as of June 1, 2025)

Admission Fee: ¥28,200

Tuition (per credit): ¥14,800

(2) Payment Periods

Admission Fee: By the end of March for the First Semester, by the end of September for the Second Semester.

Tuition: By the end of April for the First Semester, by the end of October for the Second Semester.

(3) Payment Location:

Jyosanjima Campus Accounting Office, Tokushima University 会計課経理係 (*kaikeika keiri gakari*) 2-1 Minamijosanjima-cho, Tokushima 770-8506  
(Refer to 18 on the Campus Map)

(4) Payment Method:

In principle, payments should be made in cash at the counter.

## 7 Course Overview Website

Course syllabi are available online at [Course Overview Website](http://eweb.stud.tokushima-u.ac.jp/Portal/Public/Syllabus/).  
(<http://eweb.stud.tokushima-u.ac.jp/Portal/Public/Syllabus/> )

## 8 Important Notes

- (1) Verify the course schedule, time, and content with the course instructor before applying to ensure you can attend. Graduation research cannot be chosen as a course.
- (2) The schedule may change due to university circumstances.
- (3) Course changes are not permitted after submitting the application.
- (4) If you need to cancel your enrollment, submit a cancellation request by the deadline.
- (5) Tuition must be paid regardless of attendance if the cancellation request is submitted after the deadline.

### **Cancellation Request Deadline:**

First Semester: Friday, January 30, 17:00 (5pm JST)

Second Semester: Friday, August 28, 17:00 (5pm JST)

- (6) Examination fees are as of June 1, 2025, and are subject to change.

## 9 Campus Map



- ★ 1. Student Affairs Office (学務係 *Gakumu-Gakari*) for the Faculty of Integrated Arts and Sciences (総合科学部 *Sougou Kagaku-bu*)
- 18. Jyosanjima Campus Accounting Office, Tokushima University (会計課経理係 *Kaikeika Keiri Gakan*)

1. Building No.1 (Ichigou-Kan), Faculty of Integrated Arts and Sciences
2. Building No.2 West (Nigou-Kan), Faculty of Integrated Arts and Sciences
3. Regional Cooperation Plaza: Keyaki Hall
4. Building No.2 East (Nigou-Kan), Faculty of Integrated Arts and Sciences
5. Building No.3 (Sangou-Kan), Faculty of Integrated Arts and Sciences
6. Liberal Arts and Sciences Building No.4 (Yongou-Kan)
7. Liberal Arts and Sciences Building No.5 (Gogou-Kan) & Health Service, Counseling and Accessibility Center
8. Liberal Arts and Sciences Building No.6 (Rokugou-Kan) & Center for Community Engagement and Lifelong Learning
9. Student Hall (Gakusei Kaikan) and UNIV COOP Shop
10. Regional and International Exchange Hall (Glocal Communication Hall) & Center for Community Engagement and Lifelong Learning
11. Cafeteria: Kirara
12. Gymnasium
13. Clubhouse
14. Library
15. Building for Department of Civil and Environmental Engineering & Research Center for Management of Disaster and Environment
16. Laboratories for Department of Civil and Environmental Engineering
17. Building for Department of Electrical and Electronic Engineering
18. The Common Lecture Building
19. Innovation Plaza
20. Building for Department of Mechanical Engineering
21. Building for Department of Chemical Science and Technology and Biological Science and Technology
22. Research and Experimentation Laboratories
23. Building for Department of Optical Science and Technology
24. Center for Administration of Information Technology & Building for Graduate School
25. Information Science and Intelligent Systems South Building
26. Information Science and Intelligent Systems North Building
27. Practice Building for Department of Mechanical Engineering
28. Memorial Hall of Alumni (Engineering)
29. Cafeteria: Emi\*re
30. Cafeteria: CREA
31. Institute of Post-LED Photonics
32. Building Incubation Facilities & Center for Research Administration & Collaboration & Industry-University R&D Startup Leading Institute
33. Venture Business Development Laboratory
34. Cafeteria: Sanjo
35. Extracurricular Activities Building

(別紙第 1 の 3 号様式)  
(Annex Form 1-3)

令和 年度徳島大学科目等履修生入学願書  
(year) Tokushima University Non-Degree Student Student Enrollment Application)

令和 年 月 日  
(Date: )

徳島大学長 殿  
(To the President of Tokushima University)

私は貴学の科目等履修生として入学したいので、許可くださるようお願いいたします。  
(I hereby apply to enroll at Tokushima University as a Non-Degree Student.)

|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------|---------------------------------|-------------------|
| ふりがな<br>( Furigana )<br>氏 名<br>( N a m e )                                                                                                                                  | 男・女<br>(Male / Female)<br>年 月 日生<br>(Date of birth)                                                                   |                            | 写真貼付<br>(Attach photo here)<br>(正面・脱帽)<br>(Full face with no hat)<br>縦 4cm×横 3cm<br>(Vertical 4 cm × horizontal 3cm) |                                   |                                 |                   |
| 最終学歴<br>(Highest level of education)                                                                                                                                        | 年 月 (卒業・卒業見込・修了・修了見込)<br>(Date: ) (Graduated / Expect to graduate / Completed a course / Expect to complete a course) |                            |                                                                                                                      |                                   |                                 |                   |
| 勤務先<br>(Place of work)                                                                                                                                                      | TEL ( ) -                                                                                                             |                            |                                                                                                                      |                                   |                                 |                   |
| 現住所<br>(Current address)                                                                                                                                                    | 〒<br>(Postcode)<br>TEL ( ) - /E-mail ( @ )                                                                            |                            |                                                                                                                      |                                   |                                 |                   |
| 履修希望学部<br>又は研究科<br>(Faculty where you want to study or department)                                                                                                          |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
| 在学希望期間<br>(Desired period of study)                                                                                                                                         | 令和 年 月 日 ~ 令和 年 月 日<br>(From (date): to )                                                                             |                            |                                                                                                                      |                                   |                                 |                   |
| 履修希望科目<br>(Subject You want to study)                                                                                                                                       | 授業科目名<br>(Course name)                                                                                                | 単位数<br>(Number of credits) | 前後期<br>(Semester)                                                                                                    | 曜日・講時<br>(Day of the week / time) | 授業担当教員氏名<br>(Name of the tutor) | 承認印<br>(Approval) |
|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
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|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
|                                                                                                                                                                             |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |
| 同一年度における他の学部又は教育部での履修の有無 ( 有・無 )<br>Are you taking courses at another faculty or school in the same year? (Yes / No)<br>有の場合は学部名又は教育部名 ( ) If Yes, which faculty or school? |                                                                                                                       |                            |                                                                                                                      |                                   |                                 |                   |

※1 願書は志願者本人の自筆で記入してください。(\*1 The applicant should fill in the application themselves.)  
※2 「承認印」欄は、事前に受講が可能であることを授業担当教員に確認の上、押印を依頼してください。  
(\*2 Ask the tutor who has agreed to accept you for their signature in the Approval field.)  
※3 願書は、学部又は教育部ごとに提出してください。(\*3 Submit a separate application for each faculty or school)  
※4 提出された個人情報は、入学の選考、学籍管理に関する業務（追跡調査を含む。）のみに使用します。

検定料納付確認印 印

| 履 歴 事 項 (Personal background) |  |
|-------------------------------|--|
| 学 歴 (Academic background)     |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 職 歴 (Professional background) |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 年 月 日<br>(Date: )             |  |
| 賞 罰 (Awards and penalties)    |  |

(\*4 Personal information will only be used for selection and registration purposes (including tracking studies).)

※ 1 学歴は高等学校卒業から記入してください。

ただし、外国人出願者は小学校から記入し、大学等で研究生として在学歴がある場合は、その期間も記入してください。

(\*1 Fill in your academic background starting with the name of your high school.

However, foreign applicants should start with the name of their elementary school and add the period for any time spent as a research student at university.)

※ 2 履歴に虚偽の事項を記入したことが判明した場合は、入学許可を取り消すことがあります。

(\*2 If any falsehoods are discovered in the information provided, your admission may be revoked.)

(別紙第 2 号様式)  
(Annex Form 2)

令和 年 月 日  
(Date: )

徳 島 大 学 長 殿  
(To the President of Tokushima University)

所属長  
(Supervisor)

氏 名  
(Name)

印  
(Seal or Signature)

承 諾 書  
(Letter of acceptance)

下記の者が貴学に として入学することを承諾します。  
(I consent to the person named below to attend Tokushima University as a)

記  
(Details)

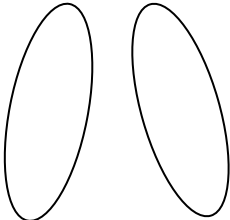
氏 名  
(Name)

所 属  
(Affiliation)

在学期間 令和 年 月 日 ～ 令和 年 月 日  
(From (date): to )

(別紙第 3 号様式)  
(Annex Form 3)

令和 年度徳島大学入学志願者健康診断書  
((year) Tokushima University Applicant Medical Certificate)  
(科目等履修生・研究生)  
(Non-degree student / research student)

|                                                                                                                                                                                                                                                        |                                            |                                                                                    |                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------|------------------------------------------------------------------|
| ふりがな<br>(Furigana)<br><br>氏 名<br>(Name)                                                                                                                                                                                                                |                                            |                                                                                    |                                                                  |
|                                                                                                                                                                                                                                                        | 男(Male)<br>女(Female)                       |                                                                                    |                                                                  |
| 生年月日<br>(Date of Birth)                                                                                                                                                                                                                                | 年 月 日 生<br>(Date of birth )                |                                                                                    |                                                                  |
| 現 住 所<br>(Current address)                                                                                                                                                                                                                             |                                            |                                                                                    |                                                                  |
| TEL ( ) -                                                                                                                                                                                                                                              |                                            |                                                                                    |                                                                  |
| 健<br><br>康<br><br>の<br><br>状<br><br>況<br><br>(State<br>of<br>health)                                                                                                                                                                                   | 胸部<br>(Chest)                              |  | その他の疾病<br>及び異常<br><br>(Other<br>diseases<br>or<br>Abnormalities) |
|                                                                                                                                                                                                                                                        | 間接<br>(Indirect)                           |                                                                                    | 医 師 所 見<br>(Medical<br>Findings)                                 |
|                                                                                                                                                                                                                                                        | 直接<br>(Direct)                             |                                                                                    |                                                                  |
|                                                                                                                                                                                                                                                        | 撮影年月日<br>(Date: )<br>( 年 月 日 )<br>(Date: ) | 所見<br>(Findings)                                                                   |                                                                  |
| <p>診断の結果上記のとおり相違ないことを証明する。<br/>(I hereby certify that the above findings are correct.)</p> <p>令和 年 月 日<br/>(Date: )</p> <p>住所(所在地) (Address)</p> <p>医療機関名 (Name of medical institution) TEL ( )</p> <p>医師の氏名 (Name of doctor) 印(Seal or Signature)</p> |                                            |                                                                                    |                                                                  |

[illegible]

|                                                            |                  |
|------------------------------------------------------------|------------------|
| 入学年度(Academic<br>year of enrollment)                       | 令和 年度<br>(Year:) |
| 学部・学科<br>(Faculty,<br>Department)<br>及び専攻<br>(and Majoror) |                  |

徳島大学長 殿  
(To the President of Tokushima University)

令和      年      月      日提出  
(Submitted date:                      )

|                                |                          |                                                                                                            |                               |                        |  |  |  |  |  |  |  |                                                                                                            |                                                                                      |  |  |  |                                           |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |  |  |  |  |  |  |  |                    |
|--------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------|--|--|--|--|--|--|--|------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--|--|--|-------------------------------------------|--|--|--|--|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--|--|--|--|--|--|--|--------------------|
| 保<br>証<br>人<br><br>(Guarantor) | 現住所<br>(Current address) | 都道府県名<br>(Prefecture)                                                                                      | 市区又は郡町村名<br>(City or village) | 町 名 ・ 番 地 等 名 (Street) |  |  |  |  |  |  |  |                                                                                                            |                                                                                      |  |  |  |                                           |  |  |  |  |  |  | 郵便番号<br>(Postal code)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                           |  |  |  |  |  |  |  |                    |
|                                |                          |                                                                                                            |                               |                        |  |  |  |  |  |  |  |                                                                                                            |                                                                                      |  |  |  |                                           |  |  |  |  |  |  | <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <span style="margin: 0 2px;">ー</span> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div> |                                           |  |  |  |  |  |  |  |                    |
|                                | フリガナ<br>(Furigana)       | <div style="display: grid; grid-template-columns: repeat(28, 1fr); gap: 2px;"> <!-- Empty boxes --> </div> |                               |                        |  |  |  |  |  |  |  |                                                                                                            |                                                                                      |  |  |  |                                           |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |  |  |  |  |  |  |  |                    |
|                                | 氏名<br>(Name)             | <div style="text-align: right;"> </div>                                                                    |                               |                        |  |  |  |  |  |  |  | 生 年 月 日<br>(Date of birth)                                                                                 | 大正 ・ 昭和 ・ 平成<br>(Taisho / Showa/Heisei)<br>年      月      日<br>(Year    Month   Day ) |  |  |  | 学生との関係<br>(Relationship with the student) |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 勤務先及び職業<br>(Place of work and occupation) |  |  |  |  |  |  |  | 電 話 番 号(Telephone) |
|                                | フリガナ<br>(Furigana)       |                                                                                                            |                               |                        |  |  |  |  |  |  |  | <div style="display: grid; grid-template-columns: repeat(28, 1fr); gap: 2px;"> <!-- Empty boxes --> </div> |                                                                                      |  |  |  |                                           |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |  |  |  |  |  |  |  |                    |
|                                |                          |                                                                                                            |                               |                        |  |  |  |  |  |  |  |                                                                                                            |                                                                                      |  |  |  |                                           |  |  |  |  |  |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                           |  |  |  |  |  |  |  |                    |

(I hereby assume responsibility for the personal behavior of the above named person, including compliance with the various regulations while at Tokushima University. Moreover, I will ensure that the specified tuition fees and other obligations to Tokushima University are fulfilled and take responsibility for payment by the deadline set.)

|                     |                          |                       |                               |                        |                            |                                                         |                                   |  |                                                |                  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                               |  |  |  |
|---------------------|--------------------------|-----------------------|-------------------------------|------------------------|----------------------------|---------------------------------------------------------|-----------------------------------|--|------------------------------------------------|------------------|--------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---------------------------------------------------------------------------------------------------------------|--|--|--|
| 学<br>生<br>(Student) | 現住所<br>(Current address) | 都道府県名<br>(Prefecture) | 市区又は郡町村名<br>(City or village) | 町 名 ・ 番 地 等 名 (Street) |                            |                                                         |                                   |  |                                                |                  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 郵 便 番 号(Postal code)                                                                                          |  |  |  |
|                     |                          |                       |                               |                        |                            |                                                         |                                   |  |                                                |                  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | <div> <div></div> <div></div> <div></div> </div> <div> <div></div> <div></div> <div></div> <div></div> </div> |  |  |  |
|                     | フリガナ<br>(Furigana)       |                       |                               |                        |                            |                                                         |                                   |  |                                                |                  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                               |  |  |  |
|                     | 氏名<br>(Name)             |                       |                               |                        | 生 年 月 日<br>(Date of birth) | 昭和・平成<br>(Showa / Heisei)<br>年 月 日<br>(Year Month Day ) | 世帯主<br>氏 名<br>(Head of household) |  | 学生との<br>続 柄<br>(Relationship with the student) |                  | 電 話 番 号(Telephone) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                               |  |  |  |
| フリガナ<br>(Furigana)  |                          |                       |                               | 自宅(Home)               |                            |                                                         |                                   |  |                                                |                  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                               |  |  |  |
|                     |                          |                       |                               |                        |                            |                                                         |                                   |  |                                                | 携帯(Mobile phone) |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                                                                                               |  |  |  |

(注) 1 ※印は記載しないこと。(Do not sign.)

(Notes:) 2 保証人は、なるべく保護者とすること。ただし、やむを得ないときは、保護者以外で満21歳以上の身元確実な者でもよい。  
(The guarantor should be a parent if possible. However, if this is not possible, the guarantor should be a person of good standing, aged 21 or more.)

3 保証人は、「保証書」、「身上調書」とも全て同一とすること。(The guarantor should be the same for warranty certificate and personal record.)

4 保証人の変更又は住所等記載事項に変更を生じたときは、速やかに届け出ること。(If the guarantor changes or changes their address, notify the university promptly.)

5 保証人 欄及び学生欄は、本人が自ら記入すること。(The guarantor field and student fields should each be filled in by the relevant person.)

(別紙第 5 の 1 号様式)  
(Annex Form 5-1)

誓 約 書  
(Promissory letter)

徳 島 大 学 長 殿  
(To the President of Tokushima University)

私 は 貴 学 に 入 学 の う え は ,  
学 則 及 び 諸 規 則 を 守 り , そ の  
構 成 員 と し て の 責 務 を 履 行  
す る こ と を 誓 い ま す 。

(On enrolling with Tokushima University, I hereby swear to abide by the regulations of the university and act responsibly as a member of the university.)

令和 年 月 日  
(Date: )

所 属  
(Affiliation)

氏 名  
(Name)

# 入学許可証明書交付願

令和      年      月      日

徳島大学総合科学部長    殿

下記のとおり証明書交付をお願いします。

記

(1) 申請者氏名 (自署) \_\_\_\_\_

(2) 入学希望者の<sup>フリガナ</sup>氏名 \_\_\_\_\_

(3) 入学希望者の生年月日・性別  
\_\_\_\_\_ 年      月      日      .

(4) 在籍区分 (○で囲む)  
学部学生    ・    大学院生    ・    研究生    ・    特別聴講学生    ・    科目等履修生

(5) 発行依頼理由 \_\_\_\_\_

(6) 発行部数 \_\_\_\_\_ 部