		Application	11 1011					eferment	
						2026年	(year)	4月 (month)	1 ⊟ (day)
То	the	President, Univer	rsity of N	/liyazaki					
		reby submit this ap enrollment fee pay							ion from
The applicant		[Under graduate]	Faculty :			Course :		grade :	
	Faculty	[Graduate school]	Faculty:			Course :		grade :	
	ılty	20	(year)	(month)	(only for Graduate	University ed students)	F	aculty Graduation	
	Name								
		(to be signed by the app	olicant)						
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