

Points to keep in mind when filling out the Application for Temporary Leave of Absence

*If the reason for applying for Temporary Leave of Absence is due to personal reasons, after submittal, the guarantor will be contacted by telephone to confirm guarantor's intent.
 If submitted by the guarantor, the applicant will be contacted by telephone to confirm his/her intent. A telephone number that is easily accessible during the daytime on weekdays may be requested.

If the applicant is firmly decided on taking a Temporary Leave of Absence and has all the documents ready on hand, the documents must be submitted by one day prior to the beginning of the course registration period.

Both applicant *and* guarantor must sign their names in the respective fields.

The applicant and guarantor seals must be different. Affix the seal.

Address and telephone number should be those registered with the University.

The mail address should be CNS account mail address.

Fill out the period indicated on the Certificate of Acceptance. If there is no period on the Certificate of Acceptance, include an academic schedule on which the course period is stated.

A separate application is required each semester.
 Spring Semester: 4/1-9/21,
 Fall Semester: 9/22-3/31

If the reason for the leave is due to personal reasons, request an interview with a faculty member in charge, and obtain his or her signature or seal and date here.

If you are receiving a scholarship or student loan, make sure to take the necessary procedures at the Student Life Section before submitting this form.

休学願
Application for Temporary Leave of Absence

No. _____

慶應義塾大学長殿
To the President of Keio University

年 月 日 (願出) _____
Year Month Day (Submit)

本学 生 の 人 員	学 部 Faculty	学 科 Department	専 攻 Major	年 組 Year Class	学 籍 番 号 Student ID Number
保 証 人 Guarantor	研究科 Graduate School	修士・博士・専門職学位 課程 Master's / Doctoral / Professional Degree Program	専 攻 Major	年 組 Year Class	学 籍 番 号 Student ID Number
氏 名 Name	フリガナ				
現 住 所 Current Address	TEL	---	---	メールアドレス E-mail address	Seal
氏 名 Name	フリガナ				
現 住 所 Current Address	TEL	---	---		

下記理由のため休学したくお願いいたします
I would like to apply for a temporary leave of absence for the following reasons.

休学理由
Reason for Temporary Leave of Absence

チェックボックス(一箇所のみ)に 点を入れ、必要事項を記入してください。
Please check the box which applies to you and provide the required information.

語学研修 For language training *入学許可書の写しを添付してください。
 留 学 For study abroad *Please attach a copy of your acceptance letter.

大学名・研修先 Name of university/institution: _____
所在国・都市 Location (City/Country) : _____
期 間 Period : _____年 月 日 ~ _____年 月 日
(単位取得予定 Do you plan to obtain credits?: あり Yes ・ なし No)

正課または課外活動中の事故による傷害のため Due to an injury sustained in an accident during a curricular or extracurricular activity *医師の診断書を添付してください。
 病気療養のため For medical treatment *Please attach a medical certificate.
 怪我のため Due to an injury *Please attach a certificate of injury.
 母国における兵役義務のため Due to military duty in the home country *Please attach a certificate of military duty (Include a Japanese or English translation).
 一身上の都合のため Due to personal reasons (具体的な理由 Give details: _____)

休学期間
Period of Absence _____年 月 日 から _____年 月 日まで
Year Month Day - Year Month Day

*奨学金・奨学融資制度を受けている者は、この届を提出する前に必ず奨学金担当窓口で手続きをしてください。
Note: Those currently receiving scholarships or financial aid must visit the Scholarships and Financial Assistance Group on their campus before submitting this application.

奨 学 金 Scholarships	受けている(名称 _____) / 受けていない Currently receiving (Name of scholarship(s)) / Not receiving any scholarships
学 融 資 制 度 Student Loan System	利用したことがある / 利用していない Have used it before / Not used before

承認
Stamp

取 扱 年 月 日 Date of Submission	有()・無 減免 有・無 (教授会/研究科委員) Required () / No Waiver Yes / No (Faculty/Department Committee)	入力データ作成 Data Entry	年 月 日 Year Month Day
---------------------------------	---	-----------------------	-------------------------

ただし、返却時に印を捺す。返却時に印を捺す。返却時に印を捺す。