

### Submittal of Notification of Returning to Study

Submittal of Notification of Returning to Study is required by one day prior to the beginning of the semester you plan to return to the University. Please bring your Student ID Card with your documents to the Academic Affairs Office. The notification forms are accepted from August for the Spring semester, and from February for the Fall semester.

The Notification of Returning to Study is sent to the guarantor together with Acceptance of Temporary Leave of Absence (Issued after approval at the Faculty Board).

### Points to keep in mind when filling out the Notification of Returning to Study

## 就 学 届

### Notification of Returning to Study

Please submit by one day prior to the beginning of the semester.

The applicant and guarantor seals must be different.

慶應義塾大学長殿 To the President of Keio University		年 月 日 (届出) Year Month Day (Submitted)
本人 Student Information	学部 Faculty 研究科 Graduate School	学科 Department 修士・博士・専門職学位課程 Master's / Doctoral / Professional Degree Program
	専攻 Major	年組 Year Class 専攻 Major
本人 Student Information	フリガナ	学籍番号 Student ID Num
	氏名 Name	年 Year
本人 Student Information	現住所 Current Address	TEL - - 〒 - -
	フリガナ	メールアドレス E-mail address
証人 Guarantor Information	氏名 Name	☉ Seal
	現住所 Current Address	TEL - - 〒 - -
下記理由のため就学の届出をいたします I would like to return to study at Keio for the following reasons		
就学理由 Reason for Returning to Study	チェックボックス(一箇所のみ)に <input checked="" type="checkbox"/> 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.	
就学理由 Reason for Returning to Study	<input type="checkbox"/> 留学終了のため Completion of study abroad <input type="checkbox"/> 休学終了のため(留学による休学を含む) Returning after a temporary leave of absence (including that of study abroad) *病気がけがで休学していた場合は、診断書を添付してください。 *If you have been absent due to illness or injury, please attach a medical certificate along with this notification. <input type="checkbox"/> その他 Other reasons (具体的な理由 Give details: )	
就学期日 Date of Return to Study	年 Year	月 Month 日 Day
奨学金 Scholarships	受けている(名称) Currently receiving (Name of scholarship(s)): *奨学生(休止中を含む)は必ず所属キャンパスの奨学金担当 *Scholarship students must contact the staff in charge of scholarship.	
<事務取り扱い欄 Official Use Only>		
受付印	ADSTデータ登録	年 月 日 ☉
	各種申請(留学の場合)	<input type="checkbox"/> 在学期間算入(有・無) <input type="checkbox"/> 単位認定(有・無)
備 考		

Notes: 1. Fill out the part inside the bold lines using an indelible pen.  
 2. Both student and guarantor must stamp their own seal or sign their signature.

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The applicant and guarantor must sign the applicant name and guarantor name fields, respectively.

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

If you have been absent due to illness or injury, please attach a medical certificate along with the notification.

Either 4/1 for the Spring Semester or 9/22 for the Fall Semester