

Submission date (yyyy/mm/dd): _____

To the Dean of the Graduate School of Frontier Biosciences,
Osaka University

Admission year: _____ Student ID: 32A

_____ year of the 5 years doctoral course at the
Graduate School of Frontier Biosciences

Full name: _____ Signature

Date of birth (yyyy/mm/dd): _____

Address: _____

Phone: _____

Email address after the
withdrawal: _____

Petition for withdrawal from graduate school

I hereby submit a petition for withdrawal from graduate school for the following reasons.

1. Reason (Please be specific. If you will be employed, please indicate that fact and the place of employment.

*Those who withdrew from the doctoral program with the required credits, please state that.

*In case the reason for withdrawal is illness, a medical certificate must be attached.

2. Date of withdrawal (yyyy/mm/dd) : _____

3. Financial aid that you are receiving

- Tuition fee exemption:
- Scholarship:
- TA/RA:

Note:

- Please visit the FBS Educational Affairs Section, if you are receiving an university recommended scholarship.
- Please pay tuition fees if you leave middle of the semester.
- Return your student ID card by the date of withdrawal.
- Your FBS email address will be deleted at the end of the academic year in which you leave the University. If you wish to continue to use your FBS e-mail address after leaving the university for reasons such as remaining in the laboratory, please apply using the prescribed form from the laboratory.
- Register in the Career Support System
<https://sp-uc.career-tasu.jp/login/?id=6cb31723964a2f7b28fba78ea39277d5>
- International students must submit "Post Graduation Career (Form 2)" with this form.

Supervisor	署名 又は 印
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*Be sure to obtain approval from your supervisor
before submitting

※以下、事務記入欄	日 付	担当者
授業料納入確認		
学生異動登録入力		

Submission date (yyyy/mm/dd): 2025/1/30

To the Dean of the Graduate School of Frontier Biosciences,
Osaka University

Admission year: 20XX Student ID: 32A XXXXXX

2nd year of the 5 years doctoral course at the
Graduate School of Frontier Biosciences

Full name: Hanako Seimei

Hanako Seimei
Signature

Date of birth (yyyy/mm/dd): 2001/2/22

Address: xx-xx, Yamadaoka, Suita-shi, Osaka

Phone: 090-xxxx-xxxx

Email address after the xxxxx.xxx@xxxx.com
withdrawal:

Petition for withdrawal from graduate school

I hereby submit a petition for withdrawal from graduate school for the following reasons.

1. Reason (Please be specific. If you will be employed, please indicate that fact and the place of employment.

*Those who withdrew from the doctoral program with the required credits, please state that.

*In case the reason for withdrawal is illness, a medical certificate must be attached.

2. Date of withdrawal (yyyy/mm/dd) : 2025/3/31

3. Financial aid that you are receiving

- Tuition fee exemption: Yes
- Scholarship: Other
- TA/RA: No

Note:

- Please visit the FBS Educational Affairs Section, if you are receiving an university recommended scholarship.
- Please pay tuition fees if you leave middle of the semester.
- Return your student ID card by the date of withdrawal.
- Your FBS email address will be deleted at the end of the academic year in which you leave the University. If you wish to continue to use your FBS e-mail address after leaving the university for reasons such as remaining in the laboratory, please apply using the prescribed form from the laboratory.
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Supervisor's seal	
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※以下、事務記入欄	日 付	担当者
授業料納入確認		
学生異動登録入力		