**Title Change Form**

Date yyyy/mm/dd

To the Dean of the School of

\*or To the President of SOKENDAI,

(\*In the case you are not regular student of SOKENDAI)

Chief Referee

[Name in Full] (Seal or Signature)

Applicant

[Name in Full]

This is to notify that my doctoral thesis title is changed as below, in accordance with the instruction from the Thesis Screening Committee.

[Before]

[After]