**Application for the Qualification for a Master's Degree**

Date: yyyy/mm/dd

To the Dean of the School of

Applicant

Department of

[Name in Full]

Student ID No.

I hereby apply for the Qualification for a Master's Degree with related documents\* in accordance with Article No.16, Clause No.1 of the Degree Regulations of The Graduate University for Advanced Studies, SOKENDAI.

Desired Degree Major\*\*: Master of

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| Seal of Main  Supervisor |
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