**[様式2-2] 総研大短期派遣・長期インターンシッププログラム　日程等変更願**

**[FORM 2-2] SOKENDAI Short-term Research Abroad & Long-term Internship Program CHANGE OF PLAN**

DATE: Year 201\_\_ Month\_\_\_\_\_\_\_\_\_\_\_\_\_ Day\_\_\_\_

総合研究大学院大学長　殿

To the President of SOKENDAI

研究科・SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

専攻・DEPARTMENT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

氏名・NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

署名（または押印）SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

次の理由により、日程等を変更したいので承認願います。

I would like to make a change in my itinerary as follows:

**1. 変更内容 CHANGE OF PLAN/CONTENT**

|  |
| --- |
|  |

**2. 変更理由　REASON FOR THE CHANGE**

|  |
| --- |
|  |

上述の変更により当初の研究計画に支障がないことを確認します。

I have confirmed that the changed itinerary would not be an obstacle to the student’s original plan.

指導教員氏名

ADVISOR NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

指導教員署名（または押印）

ADVISOR SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_