（Form 2）　For MEXT Scholarship Students

 (After a place of employment has been decided or changed)

1. Full name and nationality

2. Date of birth

3. Affiliated school/department/year

4. Student ID number

5. Workplace Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Company Name | Branch/Regional Office | Working Contents/Type of Job | Hours/week |
| 1 | 　 |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |

Total Number of hours/week　　　hours

6. Lesson/research hours per week 　hours

|  |  |
| --- | --- |
| Pledge | I hereby pledge that I will not engage in any activities outside those permitted by my resident status other than those listed. In the event of any inconvenience or disadvantage resulting from violation of the pledge (including cases of misrepresentation), I will take responsibility for my own actions and will not seek compensation from the University.（Submission Date） （Signature of Applicant）  |

\*The information contained in this pledge will be used only as necessary for the performance of our business and will not be used for any other purpose.