Application Form for Support Type B

　　　　　　　　　　　　　　　　　　　　　　　　　　　　Date / /

To President,

Faculty/Graduate School

Department / Major

Student ID No.

Name

I will apply for support for the examination fee of the English proficiency test as follows.

I agree to the Consent content, and before applying for English Language Proficiency Test assistance.

|  |  |  |
| --- | --- | --- |
| Name of Examination | Score/Grade | Test date |
| * TOEIC L&R test
* TOEIC IP test
* TOEFL-ITP test
* TOEFL-iBT test
* EIKEN
* IELTS
* Others（　　　　　　　　　　　）
 |  | / / Day/ Month/ Year |
|  Test fee |
| Yen |

（fill out the necessary information）

＊Please attach a copy of score report.

|  |
| --- |
| Consent contentI agree on the following.１　I understand that support by this system is only one time during enrollment.I also understand that even if we cancel after applying, we cannot receive support from this system afterwards.２　Personal information that the university has acquired through this process is used for the purposes for the following tasks:・Tasks related with student support services　・ Other statistical processing tasks without personal identifiers　　３　 I will cooperate when the university conducts a survey on English proficiency. |