

REGISTRATION FORM

INTERNATIONAL AFFILIATED DOUBLE-DEGREE SUMMER SCHOOL
GRADUATE SCHOOL OF ADVANCED TECHNOLOGY AND SCIENCE
THE UNIVERSITY OF TOKUSHIMA

1 Name in full:

In Roman block characters:

_____, _____, _____
(Family name) (First name) (Middle name/s)

In your native language:

_____, _____, _____
(Family name) (First name) (Middle name/s)

2 Sex: ☐ Male ☐ Female

3 E-mail address: _____

4 Current status

Home institution: _____

Program: ☐ Master's ☐ Doctoral

Are you currently enrolled in the Double-Degree Program?: ☐ Yes ☐ No

5 Which course would you like to register for?:

☐ Nano-technology Engineering Course

☐ Bio-information Engineering Course

Please submit this form by e-mail, fax or post to the CICEE Office by no later than June 20, 2008.

CICEE Office

E-mail: asada@cicee.tokushima-u.ac.jp

Phone/Fax: +81-88-656-7643

Postal address: The University of Tokushima

2-1 Minami-josanjima-cho, Tokushima 770-8506, JAPAN