

Date:

To the President of Ritsumeikan Asia Pacific University:

# Consent Form

Student ID Number

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Name

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Overseas Short-Term Summer Program

Program Name

Overseas Short-Term Winter Program

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Program Dates

\* Please refer to the  
host university's  
academic calendar

year month day - year month day

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Host Institution

Location  
(Country/Region)

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Will be resuming  
studies at APU from: \_\_\_\_\_ Academic Year

Spring semester (from April 1st)

Fall semester (from September 21st)

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Student's Signature

seal

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