

For **New** Graduates

Transcript / Certificate In-advance Request Form



Ritsumeikan Asia Pacific University Student Office

Address:
1-1 Jumonjibaru
Beppu, Oita 874-8577
JAPAN
Inquiries only:
Phone +81-977-78-1124
FAX... +81-977-78-1125

Please submit this form **with payment** to the Student Office. Non claimed certificates will be destroyed after three months. Please note any payments already made is NOT refundable.

***One(1)certificate of graduation and One(1) transcript in Japanese and English will be given free to graduates on graduation day.**
※Please apply for any and all additional required Certificates.

IDENTIFICATION *Note: Photo ID required. Please also submit a signed letter of authorization/proxy when necessary.

Student ID #		Scheduled Date of Graduation/Completion	
Surname		Birth Date (yyyy/mm/dd)	
Given Name(s)		Phone Number	

TRANSCRIPT/CERTIFICATE REQUEST INFORMATION

Special Instructions	(Examples: seal and stamp on envelope or individually packaged transcripts)
Purpose for Request (Please indicate)	<input type="checkbox"/> Immigration Bureau <input type="checkbox"/> Employment <input type="checkbox"/> Entrance Examination <input type="checkbox"/> Other ()

Type	Fee	Additional Copies			Subtotal
		JAPANESE	ENGLISH	Total	
① Certificate of Graduation / Completion (with degree name)	¥300 each				¥
② Transcript of Academic Record	¥300 each				¥

Delivery/ Pick up Method	Apply by Sep. 6 (Fri): will receive at the Graduation Ceremony with your Diploma		
	Apply between Sep. 7 – 12: will be issued after Sep. 17	<input type="checkbox"/> Pick up <input type="checkbox"/> By post (in Japan) ¥510 <input type="checkbox"/> Overseas mail: please inquire	

Payment Method	<input type="checkbox"/> Credit Card <input type="checkbox"/> Postal money order <input type="checkbox"/> Certificate stamp			TOTAL	¥
Proxy's ID #	Name of Proxy				

I hereby attest that I am the above-named person requesting these transcripts/certificates accompanied by the fee required. Signature: _____ Date: _____yy_____mm_____dd	2 発行	3 確認	4 交付印	1 領収印
	/	/	サイン	サイン

*Personal Information on this form shall be used within the original purpose of issuing the above transcript/certificate(s).

In-advance New Graduates, Transcript/Certificate Request Slip

Student ID #: _____ Name: _____ Total Amount: ¥ _____
 Quantity: (①) _____ copies (②) _____ copies Pick Up Mail

Payment Received
Student Advisory Office

サイン