

* **Submission deadline for adjustment of the tuition amount: April 30th for the Spring Semester, October 31st for the Fall Semester**

* If you are planning to take a leave of absence for one year, submit one "Application for Leave of Absence" for each semester.

Application for Leave of Absence (Semester)

Date of Submission: _____ (Year) _____ (Month) _____ (Day)

Att.: Dean of the School of _____, Waseda University

Student

School		Specialty, Course, Major	
Student Number		School Year	
Name	Seal		
Address	Postal Code: ____ - ____		
Phone No.			

Guardian

Name	Seal		
Address	Postal Code: ____ - ____		
Phone No.			

*** Both the student and guardian must sign and affix their own separate seals.**

In submitting the attached document, I hereby request permission for a leave of absence for the reason described below.

1. Period of leave of absence: From _____ (Year) _____ (Month) _____ (Day)
to _____ (Year) _____ (Month) _____ (Day)

*** Spring Semester: 4/1–9/20, Fall Semester: 9/21–3/31 of the following academic year.**

2. Reason for leave of absence:
- _____

Fill in the following sections only if the reason for your leave of absence is for the purpose of completing an overseas language training program or an internship.

3. Country name and institution name: _____

4. Traveler's insurance specified by Waseda University: I have already purchased it/ I am planning to purchase it / I have already purchased a different insurance policy

*** If you have already purchased a different insurance policy, attach documentation describing the coverage.**

Attention

If you plan to study at an institution of higher education (e.g. a university or a language school affiliated with a university), you need to submit an "Application for Studying Abroad" instead of this form because you will be treated as a student studying abroad, not as a student taking a leave of absence. Please note that if you are treated as a student taking a leave of absence, Waseda University will be unable to recognize any credits that you may earn from your studies.

The following is for administrative use only.-----

Liaison Matters	Interview Date	Reception Date
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