Please find the attached guidance for your stay at the guest house “Residency SEITOKUKAN”. If you would like to stay at the guesthouse, please submit this form with your scholarship application.

RESIDENCY SEITOKUKUKAN BOOKING REQUEST FORM

長崎大学医学部レジデンシー精得館予約申込書

（長崎医学研究奨学金申請者用）

|  |  |
| --- | --- |
| Your University Name所属大学名 |  |
| First Name宿泊者名前 |  |
| Middle Name |  |
| Last Name宿泊者名字 |  |
| EmailEメール |  |
| Date of Check In宿泊開始日 |  |
| Date of Check Out宿泊終了日 |  |
| Male or Female性別 |  |

Please send this form to the following Email address.

|  |
| --- |
| Email: gakujutu\_kikaku@ml.nagasaki-u.ac.jpGeneral Affairs DivisionNagasaki University Graduate School of Biomedical SciencesPhone: +81-95-819-7195 |

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（事務確認欄）

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| --- | --- | --- | --- |
| 受付日 | 仮予約 | 予約状況通知 | 受入教員 |
|  | 可・否 |  |  |