

## Confirmation letter of Provisional Acceptance

To President of JSUM

Date of issue:     /     /  
(Year/Month/Day)

Applicants Name:

Nationality:

Date of Birth:

Age:

I shall be delighted to accept the above mentioned person at my department as a training / research doctor of JSUM Fellowship, if the JSUM accept him or her.

N a m e :  
(JAPAN)

Institution:  
(JAPAN)