

Date of Application: _____
(Month)/(Day)/(Year)

TUFS-ICC User Account Application Form (re-issue)

User Affiliation	<input type="checkbox"/> Board member	<input type="checkbox"/> Full-time teacher	<input type="checkbox"/> Part-time teacher
	<input type="checkbox"/> Foreign teacher	<input type="checkbox"/> Foreign researcher (ILCAA)	
	<input type="checkbox"/> Full-time clerical staff	<input type="checkbox"/> Part-time clerical staff	
	<input type="checkbox"/> Others (_____)	[manager's affiliation and signature]	
Name (in kanji or katakana)	_____		
Name (in Roman alphabet)	_____		
Affiliation	_____	Room Number	_____
Telephone Number (Extension)	_____		
Delivery place(way)	<input type="checkbox"/> Here		
	<input type="checkbox"/> Online (Mail address: _____)		
	※other than 「 @tufs.ac.jp 」		
TUFS Email address (or TUFS-ICC ID)	_____		
	※ The mail address that you need to re-issue (@tufs.ac.jp)		

■Reason for Application (briefly)

Notes

- By submitting this application, you agree that you have understood and consent to the “Regulations Concerning the Use of Information Collaboration Center”.
- You may not obtain more than one account.
- Please complete this application and submit it to the designated location.
- ~~The weekly cutoff for submissions is Monday and permits will be issued on Friday.~~ Please obtain your permit at the location where you submitted your application.

Reception Use Only

受付日 : _____ 年 _____ 月 _____ 日

受付者 : _____

本人確認 : (_____)

連絡事項 :