Statement of Reason for Cancellation of Application for Degree

Date:

To: President, University of Electro-Communications

　　　　　　　　　　　　　　　　 Graduate School of

　　　　　　　　　　　　　　　　 Doctoral / Master’s Program

Department of

　　　　　　　　　　　　　　　　 Student number:

Applicant: (seal) \* Head of Department (seal)\*

 Supervisors

　　　　　 　　　　 (seal)\*

　　　　　 　　　　 (seal)\*

　　　　　 　　　　 (seal)\*

\*The seal can be omitted only for the autograph signature.

I wish to cancel my Application for Degree for the following reason:

Details

Title of dissertation:

Reason for cancellation: