

Departure Notice

YEAR MONTH DAY
Date: 20 / /

To the Director of Hitotsubashi University International Residence Halls

Name of University	<input type="checkbox"/> Hitotsubashi <input type="checkbox"/> Gakugei <input type="checkbox"/> Electro-Comm. <input type="checkbox"/> Tokyo Univ. Agric. & Tech.		
Student Status/Grade	Degree-Seeking	<input type="checkbox"/> Undergraduate/ year / <input type="checkbox"/> Graduate/ year	
	Non-Degree-Seeking	<input type="checkbox"/> Exchange (UG · G) <input type="checkbox"/> Research	
Name			
Student ID			
Mobile Number	— —		
Email Address	@		

I will leave the International Residence Hall of Hitotsubashi University and report as follows.

Room No & Type.	Kodaira Room No: _____ <input type="checkbox"/> Single <input type="checkbox"/> Couple <input type="checkbox"/> Family	
Reason for Departing	<input type="checkbox"/> Expiration of Term <input type="checkbox"/> Study abroad or take leave (until 20 / /) <input type="checkbox"/> Dismiss University <input type="checkbox"/> Repeating a Course <input type="checkbox"/> Returning Home <input type="checkbox"/> Changing rooms to: _____ <input type="checkbox"/> Other: _____	
Application for extension	<input type="checkbox"/> I will apply for an extension. → After the lottery, please notify PLAZA of the result.	
First Room Inspection (2 weeks prior to departure)	Must be between 9:00-18:00 Mon-Fri, excluding national holidays. (Purpose: To check if there are damages in the room) Mon/Tue/Wed 20 / / , Thu/Fri day :00 <small>Year Month Day Day of week Hour</small>	
Final Room Inspection (Keys must be returned after the final room check)	Must be between 9:00-18:00 Mon-Fri, excluding national holidays. (Purpose: To check if the room is cleaned and in its original state) Mon/Tue/Wed 20 / / , Thu/Fri day :00 <small>Year Month Day Day of week Hour</small>	
Address after Leaving	TEL: _____ Post Code: _____	
Scheduled Date of Departing Japan	_____ Mon/Tue/Wed <input type="checkbox"/> Narita <input type="checkbox"/> Haneda Terminal(____) 20 / / , Thu/Fri day Flight No. _____ <small>Year Month Day Day of week</small>	
Bicycle	•Do you own a bicycle? <input type="checkbox"/> Yes <input type="checkbox"/> No →If Yes, I will <input type="checkbox"/> Bring it to my new address <input type="checkbox"/> Donate it to ISDAK <input type="checkbox"/> Other If you will donate to ISDAK, please bring your "Bicycle Transfer Certificate" and bicycle to PLAZA.	
Personal belongings	<input type="checkbox"/> I will properly dispose of personal belongings in the kitchen and shower room, and will not leave anything in this dormitory. If the items left in the dormitory are disposed after moving out, I will not make any complaints.	
*For Office Use	20 年 月 日()	確認印 <input type="checkbox"/> 座停止 <input type="checkbox"/>