(Form 2)

**Letter of Nomination to be a Recipient of Support Grant for**

**International Students at the University of Fukui in 2017**

Dear President of the University of Fukui,

 Name of University:

 Position/Name:

I recommend that the student below be considered for receiving Support Grant for International Students at the University of Fukui in 2016.

 Signature:

|  |  |  |  |
| --- | --- | --- | --- |
| Name of candidate |  | Date of Birth |  , ,  mm , dd , yyyy |
| Sex | M / F |
| Nationality |  |
| School | Name of University: |
| Faculty/Graduate School: |
| Duration of Study at University of Fukui |  , , ～ , , ( Week / Month)mm , dd , yyyy ～ mm , dd , yyyy |
| Other Financial Support | NO　/ YES (　　　　　　　　　　　　　　　　　　　　　　　　　　）＊If the candidate is receiving or applying for any other financial support currently or in the future, please circle “YES” and write the name of the support in parentheses. |
| Reason for Nomination |  |

★**Information above will be used only for this project, not for any other purposes.**