

Only for 1-Year MPH  
Course Applicants

Graduate School of Medicine, Kyoto University  
Professional Degree Program in Public Health 2024

## Certificate of Employment Period

Name in Katakana

Name

Date of Birth      /      /

This is to certify that the above mentioned person 

<input type="checkbox"/> is currently employed
<input type="checkbox"/> was employed

 as follows.

Name of the  
Institute/Company:  
Appointment date:

/      /

Employment Period

From  
To

/      /      /  
/      /      /

(Total:    Years    Months)

Position name

(Full-time/Tenure)

\*Dispatched period as a researcher to the institution

(Fill in the following if you are working as a dispatched researcher as an employee of a private institute/company)

Name of the Institute:

Employment period      /      /      ~      /      /

Date:    /      /

Position of Certifier  
Name of Certifier

Official seal or  
institution/company seal