

**【Professional Degree Program in Public Health 2024】**

<b>Public Health Special Selection for Working Applicants</b>
<b>MCR Course</b>

**Certificate of Employment Period**

Name in Katakana

Name

Date of Birth      /      /

This is to certify that the above mentioned person  $\left( \begin{array}{l} \square \text{ is currently employed} \\ \square \text{ was employed} \end{array} \right)$  as follows.

Name of the  
Institute/Company

Employment Period      From      /      /      /      To      /      /      /      (Total:      Years      Months)

Position name      (Full-time/Tenure)

Date:      /      /

Position of Certifier  
Name of Certifier

Official seal  
or institution/company seal