

Special selection for
working applicants

Graduate School of Medicine, Kyoto University
Doctoral Program in Public Health 2026

Certificate of Employment Period

Name in Katakana

Name _____

Date of Birth / / (in western calendar)

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 :

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

Position Name: (Full-time/Tenure)

Date: / /

Position of Certifier
Name of Certifier

Official seal
or institution/company seal