

## Consent about the reference and use of the result of the Entrance Examination

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

To: World leading Innovative Graduate Study Program for Life Science and Technology  
(WINGS-LST)

The Applicant:

Personal Address	〒
Name in full (print name)	
Signature (autograph)	
Affiliation as of April 2020 Graduate School	
Department	
Graduate Program (M.S./Ph.D.) of The University of Tokyo Circle applicable one as of December 2019	<ul style="list-style-type: none"><li>· Master student or MD course student</li><li>· Doctor student</li><li>· Prospective student for 4-year Doctor course</li></ul>
Enrollment Year / Month or expected enrollment year/month Circle one	Year: 2018 · 2019 · 2020 Month : April · September
Name of supervisor or expected supervisor as of April 2020	

The applicant must fill and personally sign the form.

I (print name), \_\_\_\_\_, hereby agree to the access and use of my Entrance Examination Results of the Graduate School stated above, by the Selection Committee of the Graduate School I belong to and the Academic Affairs Committee of the WINGS-LST program, for the selection of the WINGS-LST students for FY2020.

Handling of personal information:

The personal information you provide shall be used solely for the 2020 WINGS-LST student selection and never used for any other purpose.

This is an English translation of the original Japanese version, and if there is any discrepancy between the Japanese version and the English version, the Japanese version shall prevail.