**Application form for postponing payment**

**(for 2014 fall semester’s new graduate students)**

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| --- | --- | --- | --- |
| **Department** |  | **Course** |  |
| **Applicatin No.** |  | **Name** |  |
| **Contact No.** |  | **Email** |  |
| **Address** |  | | |
| **Parents Name** |  | **Contact No.**  **Of Parents** |  |
| **Date of Submission** |  | **Reason for postpoing payment** | **Staying abroad during payment period.** |
| **Expected date of payment** | **Around Aug 20th, 2014.**  **(We will contact you in the middle of Aug)** | | |

**As a successful candidate of 2014 fall semester, I would like to apply for the postponing payment because I will be abroad in the period of payment. (July 3th ~ July 7th). Please confirm postponing payment.**

**Name : (signature)**

**To Dean of Graduate School.**