

Part-time Work of Foreign Student Confirmation Form

Appli -cant	Name		Alien registration No.	
	Department (Major)		Term	
	Tel No.		e-mail	
The expected place of employ- ment	Company name			
	Business registration No.		Type of industry	
	Address			
	Employer	(Seal/Sig)	Tel No.	
	Period of working		Wage (per hour)	
	Working hours	Weekday: _____ Sat-Sun: _____		
<p>I hereby confirm that the above named student is enrolled at our university, and considering his/her academic and research progress hitherto, I believe that the part-time job indicated above will not impede his/her learning (research) in school.</p> <p style="text-align: center;">20</p>				
○ ○ The head of immigration (branch) office				
Confirmation from a Uni. Official.	Uni.		Name	(Seal/Sig)
	IEQAS	YES <input type="checkbox"/> NO <input type="checkbox"/>		
	Job Position (Tel No.)			