

To: Director of the Information and Communication Headquarters

Alumni Application for a Nagoya University ID

(including former faculty and staff members)

I hereby request to be issued a Nagoya University ID as follows.

(1) Date of Application:

(2)Name (seal)		(3)Maiden name	
(4)Address	Postal code:		
(5)Phonenumber		(6) Email address	
(7)Last affiliated department		(8) Last year of enrollment or tenure	
Documents to submit	(9) Enrollment / tenure confirmation document	Graduates/students with a doctorate/master's degree	Former faculty or staff members
		<input type="checkbox"/> Diploma <input type="checkbox"/> Graduation or completion certificate <input type="checkbox"/> Other ()	<input type="checkbox"/> Notice of Resignation <input type="checkbox"/> Certificate of Employment <input type="checkbox"/> Other ()
	(10)Identification document	<input type="checkbox"/> Passport <input type="checkbox"/> Driver's license <input type="checkbox"/> Health insurance card <input type="checkbox"/> Certificate of residence <input type="checkbox"/> Extract of family register <input type="checkbox"/> Other ()	
		(11) Documents to confirm name change	<input type="checkbox"/> Extract of family register <input type="checkbox"/> Other ()
Summary	If you have your Nagoya University ID or Zengaku ID, please enter it here		

◇Please do not use the columns below. For Information and Communications Headquarters use only.

Item	Treatment condition		Person in charge	
Receipt (acceptance) date		Distinction of bringing / the mail	<input type="checkbox"/> In person <input type="checkbox"/> by postal mail	
Issue date		Distinction of delivery by hand / the mail	<input type="checkbox"/> In person <input type="checkbox"/> by postal mail	
General Affairs Section				
Remarks				

Basic Authentication Information (Attachment 1)

	Surname	Middle name	Given name
Kanji	(名大)		(太郎)
Alphabetical Characters	(Meidai)		(Taro)
Katakana	(メイダイ)		(タロウ)

Please refer to (examples) and fill out the table.

Job title	/
Job category	
Affiliated department	
Affiliated department / major / section	
Date of birth	
Gender	
Valid email address	

Legend: Treatment of each basic authentication item (The background color for the table is divided by the type of treatment as described below.)

The applicant shall be deemed to have given consent to the registration of the above personal information by submitting this document.

The information will be provided to University information service providers on their request; provided, however, that the information will be deleted after the applicant is removed from the enrollment registry in accordance with Articles 10 and 11 of the Nagoya University Personal Information Protection Rules.

The information will be provided to University information service providers on their request and be used for any operations with the Nagoya University ID as well as after you are removed from the enrollment registry regardless of the existence of your application. (The service will be provided when you are enrolled and will not be provided when you are removed from the enrollment registry; provided, however, that the service will be provided after removal from the enrollment registry should you so request.)

I will provide the above information to University information service providers.

Agree Disagree (Check one.)

The information will not be provided to University information service providers regardless of your enrollment or removal from the enrollment registry. The information will be used only for services and operations provided by the Information and Communications Headquarters.