Form No.1

Application for Thesis Evaluation

Date: . .

　To: President of Obihiro University of

Agriculture and Veterinary Medicine

Applicant

Master’s Program of

Graduate School of Animal and Veterinary Sciences and Agriculture

Obihiro University of Agriculture and Veterinary Medicine

Student ID:

Name of Applicant:

Signature of Applicant:

　I am applying for the Master’s degree (Agriculture / Veterinary Life Science / Animal and Food Hygiene) by submitting a thesis and the required documents/forms, in accordance with Section 1, Article 5 of Obihiro University of Agriculture and Veterinary Medicine Degree Rules.

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| １　Thesis Index  ２ Abstract of the thesis | ４ sets  ４ sets |

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|  | Signature of  Main Advisor |  |