Form 4

Compliance with Visiting Research Student

☐ I certify that all the statements and information provided in the application documents are true.

☐ I will obey the rules and regulations set by Keio University.

☐ I will further acknowledge and promise that I will not disclose any internal information, such as technologies obtained at the school, to third parties without authorization by research advisors.

☐ I will engage in the activity without causing trouble to Keio University or bringing disgrace on the University.

☐ I will buy a traveler's insurance that covers liability, accidents, illness, etc., arranged prior to participating in the program and valid from the date of departure until the date of return.

☐ I will complete resident registration procedure and join "National Health Insurance" if necessary.

I hereby confirm that I understand and agree to the terms of this compliance and sign below.

Date:_____

Name in full:_____

Signature:_____