(Name of institute)
(Address)
(Official seal)

Attention: Dean of the Institute of Medical Science, The University of Tokyo 4-6-1, Shirokanedai, Minato-ku, Tokyo, JAPAN

Letter of Consent

(Month) (Day) (Year)

We agree that the following person, who is working for our institute, will enter the Institute of Medical Science, the University of Tokyo (IMSUT) as a research student in order to acquire professional skills according to his/her own volition.

We must also add that this individual's entrance into IMSUT is not for business purposes of our company.

Name:		
Affiliation:		-
	Sincerely,	
	Signature:	