Dual Employment Request (Part-Time Medical Practitioner / Part-Time Lecturers)

Please write within the bold lines.

 * In the case where your organization does not have a home page, this does not have to be entered. * Please enter this if it is different to the location of the oproviding the secondary employment. Dual Employment Request (Application for Perm 	where this has not yet been decided, enter the number of classes and overall hours etc. in as much detail as possible. * Enter your organization's file reference number.
President of Tohoku University I would like to ask for your consent to the request of the employee below to pursue dual employment. Organization Name: Representative:	Document Number: 0000 No. ×××× April 1, 2010 Address of the company where the applicant will be dually employed (starting with the post code): 0 0 0 0 0 0
Website address: http://www.tohoku.ac.jp/japanese/index.html Content of Business * It is not necessary to enter details of the Content of Business	Affiliated department, supervisor, contact telephone number: General Affairs Department, General Affairs Section Address of work location (starting with the post code): 0-0 000cho, Chiyoda-ku, Tokyo 000-0000 Energy Weyler Eight = 10.000 17.000
 Name of employee requesting dual employment: Ichiro Aoba Job title: Professor Affiliation: Graduate School of ○○○ Research Department Position Title: Commissioned Doctor (Part Time Doctor) Content of responsibilities: Providing medical examination and treatment to inpatients and outpatients (as a physician). (Delivering lectures on ○○ theory to undergraduates) * In all cases enter who the application refers to, and, in the case of a part-time employed medical practitioner, the "area of practice", in the case of an instructor employed part-time, the "subject area of the classes", or, in the case of a research lecturer, the "lecture theme". 	 Every Week Friday 13:00 - 17:00 ☐ times per year / month / week / other period Other () I time = _4 hours Anticipated Period of Dual Employment Remuneration: □ No ■ Yes _20,000 yen per _1 (year(s) / month(s) / day(s) / time(s) / hour(s)) Other () Travel Expenses: □ No ■ Yes

Granization Name (Including Name of Representative / Contents of Business) Title of Office Content of Duties

* In the case where disclosure of corporate documents is requested under Article 3 of the [Law Regarding Access to Information Held by Independent Administrative Agencies], the University has an obligation to disclose that information under Article 5 of the same legislation. However, under ordinary circumstances, it is not the case that everything in the requested documents must be disclosed. Only the portion(s) of a document containing information listed in the sections of Article 5 need be disclosed. This disclosure must be partial disclosure as set out in Article 6 of the same legislation. The remainder of the document is exempt from disclosure. In future, in the event of a request for disclosure of corporate documents relating to the dual employment that is the subject of this request, make sure to check that there are no obstacles to disclosure under Article 5 of the "Law Regarding Access to Information Held by Independent Administrative Agencies".