# **Hokkaido University Collection of Scholarly and Academic Papers (HUSCAP)**

# **Letter of Consent for Thesis Publication**

To the Director of Hokkaido University Library

I hereby agree to have my doctoral/master’s/bachelor’s thesis added to the Hokkaido University Collection of Scholarly and Academic Papers (HUSCAP) and released to the public with the approval of the chief examiner of my thesis.

Name (signature): Signature date:

Chief examiner of the thesis:

(signature): Signature date:

\*　The signature of chief examiner is required for master’s/bachelor’s thesis.

Information on the degree awarded and the relevant thesis (Block Letters):

|  |  |
| --- | --- |
| Degree awarded | ☐ Doctor ☐ Master □ Bachelorthe degree of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Date of degree awarded |  |
| Diploma number |  |
| Author | (Please leave this column blank if the thesis was written by a single author.) |
| Thesis title (Japanese)  |  |
| Thesis title (English) |  |
| Publication timing | ☐ I would like my thesis to be published after the date of degree awarded.☐ I would like my thesis to be published on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ or later. |

Contact Information etc.

|  |  |
| --- | --- |
| Affiliation | Graduate School of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Address |  |
| Telephone number |  |
| E-mail address |  |
| Remarks |  |

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