letterhead

Certificate of Medium of Instruction

Faculty: Global Management

Department: Department of Global Management

Name:

Student ID:

Enrollment Date: Month Day, Year Date of Birth: Month Day, Year

No.	Subject name	Language
1	Subject name 1	English
2	Subject name 2	English & Japanese
3	Subject name 3	Japanese

Month Day, Year

[Name]

Managing Director

Office of the Faculty of Global Management, Chuo University

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