(Attachment: Form 1)

Date: (Month/Day/Year)

To: Dean, Graduate School of Engineering

Student ID No. 050T00T

Name: XXXXX XXXXX Signature

## **Dissertation Review Request**

I submit the following documents and hereby request a review in accordance with the provisions of Article 7 of Kobe University Degree Standards.

Dissertation: (number of examiners+1) copies

\* Four copies of the dissertation are required to be submitted when there are three dissertation examiners (and one additional copy shall be submitted per additional examiner). Two copies of the dissertation bibliography shall be submitted regardless of the number of examiners.

Dissertation Bibliography: two copies

\* Write "two copies" regardless of the number of examiners.