**Application form of Ryodoraku Certificate**

I have satisfied the necessary findings regarding the acquisition of qualification, which is under the regulation of acceptation on authorized Ryodoraku Doctor certificate of the Japanese Society Ryodoraku Medicine. Hereby I would like to apply for certification together with the documents required for certification.

(The types of application on certificate)

[ ] Authorized Ryodoraku doctor certificate,

[ ] Authorized Ryodoraku specialist doctor certificate,

[ ] Ryodoraku eternal doctor certificate,

[ ] Authorized Ryodoraku master certificate,

[ ] Authorized Ryodoraku specialist master certificate,

[ ] Ryodoraku eternal master certificate.

(Application date): year, month, and date

(Address):

(Telephone):

(Fax):

(E-mail address):

(Name, Signature): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Addressed to President of Japanese Society of Ryodoraku Medicine.

Attached Papers:

[ ] l. Copy of license (Medical Doctor, Dentist, Licensed Acupuncturist, Licensed Moxibustion etc.)

[ ] 2. Papers of certify your acquired units (copy is available)

( ) 1) List of attendance of academic conference or \*seminar

( ) 2) Abstract of the lecture on academic conference or \*seminar

( ) 3) Copy of the first page on academic report

( ) 4) Copy of the receipt of Authorized registration fee

[ ] 3. Application of the transient measure of Ryodoraku certificate acceptation

C.F. \* Fit O-mark on the type of certificate article of papers and attached paper

\* Send filled application forms with attached papers to the international administration.

\* Registration fee must be paid on the day of the examination. (Cash only)

\* Should you need assistance, contact at itn`jsrm.gr.jp

International Administration

C/O AN Medical: 1-2-18-108 Shimomeguro Meguro 1530064 TOKYO Japan