

## Password Initialization Application Form

To:

Director  
Center for Multimedia and Information Technologies  
Kumamoto University

I hereby apply to initialize my password for your center's computer system.

## User Details

(ID name must be alphanumeric, maximum of 8 characters)

(furigana) Name		Job Title		ID Name	
Affiliation	(Faculty)	(Department/Course)		Extension Number	

## Person in Charge of Payment Details (Please do not forget to affix your seal.)

(furigana) Name		Seal	Job Title		Extension Number
Affiliation	(Faculty)	(Department/Course)			Extension Number

\_\_\_\_\_ For Center Use Only \_\_\_\_\_

## Initial Password

( )	UID:	GID:
-----	------	------

I have approved the application above.

Hiroshi Nakano, Director  
Center for Multimedia and Information Technologies