Form 3

＜Coauthor use＞

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Kyushu Institute of Technology Institutional Repository Registration Consent Form

To

Name:

　　　　　　　Telephone No.:

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In accordance with the ‘Kyushu Institute of Technology Institutional Repository publication utilization consent conditions’, I give consent to the electronic publication of the paper below that I coauthored with yourself.

Details

Thesis name:

Author name:

Magazine name:

Vol. No.:

Publication year:

**Kyushu Institute of Technology Academic Repository**

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