

Note : In case of to be found that you have misrepresented the facts in an application, you will be unfavorably treated in the process.

22 通学先 Place of study

(1)名 称
Name of school

CHIKUSHI JOGAKUEN UNIVERSITY

(2)所在地
Address

2-12-1 Ishizaka, Dazaifu, Fukuoka, JAPAN

(3)電話番号
Telephone No.

092-925-9979

23 修学年数 (小学校～最終学歴)
Total period of education (from elementary school to last institution of education)

年
Years

24 最終学歴 (又は在学中の学校)
Education (last school or institution) or present school

(1)在籍状況
Registered enrollment

☐ 大学院 (博士)
Doctor

☐ 高等学校
Senior high school

☐ 卒業
Graduated

☐ 大学院 (修士)
Master

☐ 中学校
Junior high school

☒ 在学中
In school

☒ 大学
Bachelor

☐ 小学校
Elementary school

☐ 休学中
Temporary absence

☐ 短期大学
Junior college

☐ その他 ()
Others

☐ 中退
Withdrawal

☐ 専門学校
College of technology

(2)学校名
Name of the school

(3)卒業又は卒業見込み年月
Date of graduation or expected graduation

20YY

年
Year

MM

月
Month

25 経歴 (直近5年の職歴及び学歴 (高等学校卒業以降のものに限る) を記入)
Personal history (Work experience and educational background for the last 5 years (limited to those after graduating from senior high school))

始期 Start		終期 Finish		経歴 Personal history	始期 Start		終期 Finish		経歴 Personal history
年 Year	月 Month	年 Year	月 Month		年 Year	月 Month	年 Year	月 Month	
20YY	MM	20YY	MM	〇〇HighSchool					
20YY	MM	20YY	MM	〇〇University					

26 日本語能力 (専修学校又は各種学校において日本語教育以外の教育を受ける場合に記入)
Japanese language ability (Fill in the followings when the applicant plans to study at advanced vocational school or vocational school (except Japanese language))

☐ 試験による証明
Proof based on a Japanese language test

(1)試験名
Name of the test

(2)級又は点数
Attained level or score

☐ 日本語教育を受けた教育機関及び期間
Organization and period to have received Japanese language education

機関名
Organization

期間:
Period from

年
Year

月
Month

から
to

年
Year

月
Month

まで

☐ その他
Others

27 日本語学習歴 (高等学校において教育を受ける場合に記入)
Japanese education history (Fill in the followings when the applicant plans to study in high school)

日本語の教育又は日本語による教育を受けた教育機関及び期間
Organization and period to have received Japanese language education / received education by Japanese language

機関名
Organization

期間:
Period from

年
Year

月
Month

から
to

年
Year

月
Month

まで

28 滞在費の支弁方法等 (生活費, 学費及び家賃について記入すること。) ※複数選択可
Method of support to pay for expenses while in Japan (fill in with regard to living expenses, tuition and rent) * multiple answers possible

(1)支弁方法及び月平均支弁額
Method of support and an amount of support per month (average)

☐ 本人負担
Self

円
Yen

☐ 在日経費支弁者負担
Supporter in Japan

円
Yen

☐ その他
Others

円
Yen

☐ 在外経費支弁者負担
Supporter living abroad

円
Yen

☐ 奨学金
Scholarship

円
Yen

(2)経費支弁者 (複数人いる場合は全てについて記入すること。) ※任意様式の別紙可
Supporter (If there is more than one, give information on all of the supporters) * another paper may be attached, which does not have to use a prescribed format.

①氏 名
Name

②住 所
Address

③職業 (勤務先の名称)
Occupation (place of employment)

④年 収
Annual income

円
Yen

電話番号
Telephone No.

電話番号
Telephone No.

小学校入学から在留資格認定証明書申請時点までの合計修年
限を記入してくださいPlease
correct the number of years
from elementary school to
academic year of the university

高等学校卒業年月日/大学入
学年月日を記載してください。
大学の終期は、24(3)の卒業又
は卒業見込み年月と同じにし
てください。Please list the date
of high school graduation /
date of college enrollment. The
end date of the college should
be the same as the date of
graduation or expected

該当する項目をチェックし、金
額を記入してください
Please check all applicable

奨学金を受給する場合は、その
内容がわかる書類を提出してくだ
さい。If you have received a
scholarship, please submit
certificate to show the details of
the scholarship

経費支弁者が1名以上いる場合
は、2人目以降の28(2)①～④の
情報を別紙に記載してください。If
there is more than one supporter,
please provide the information in
28(2)①～④on a separate sheet

For applicant, part 3 P ("Student")

For certificate of eligibility

Relationship with the applicant (Check one of the followings when your answer to the question 27(1) is supporter living abroad or Japan)

☐ 兄弟姉妹 ☐ 叔父（伯父）・叔母（伯母） ☐ 受入教育機関 ☒ 友人・知人
Brother / Sister Uncle / Aunt Educational institution Friend / Acquaintance

☐ 取引関係者・現地企業等職員の親族
Relative of business connection / personnel of local enterprise

☐ その他 ()
Others

Organization which provide scholarship (Check one of the following when the answer to the question 27(1) is scholarship) * multiple answers possible

☐ 公益社団法人又は公益財団法人 () ☐ その他 ()
Public interest incorporated association / Others
Public interest incorporated foundation

☒ 帰 国
Return to home country

☐ 日本での進学
Enter school of higher education in Japan

☐ 日本での就職 Find work in Japan

☐ その他 (Others)

Actual guardian in Japan (Fill in the following if the applicant is to study at a junior high school or elementary school)

電話番号 Telephone No.	携帯電話番号 Cellular Phone No.
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Applicant, legal representative or the authorized representative, prescribed in Paragraph 2 of Article 7-2.

(3)住所
Address 2-12-1 Ishizaka, Dazaifu, Fukuoka, JAPAN

電話番号 Telephone No.	092-925-9979	携帯電話番号 Cellular Phone No.
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I hereby declare that the statement given above is true and correct.
Signature of the applicant (representative) / Date of filling in this form

年 月 日
Year Month Day

Attention In cases where descriptions have changed after filling in this application form up until submission of this application, the applicant (representative) must correct the part concerned and sign their name.

The date of preparation of the application form must be written by the applicant (representative).

奨学金を受給する場合は、その内容がわかる書類を提出してください。If you have received a scholarship, please check the organization