

Application Slip		Application No. *Office use	
Awarding Body & Scholarship Name	Application Deadline (mm/dd):_ _/_ _ _____ _____	<input type="checkbox"/> Benefit Type <input type="checkbox"/> Loan Type	yen <input type="checkbox"/> Per Month <input type="checkbox"/> Per Year
Faculty/Dept./Year/Class		Student ID	
Full Name			
Enrollment Status <input type="checkbox"/> Repeated a year <input type="checkbox"/> Temporary leave of absence <input type="checkbox"/> Studying abroad <input type="checkbox"/> Suspended <input type="checkbox"/> None of the above			
Scholarships Applied to this Academic Year (include those for which application was rejected) <input type="checkbox"/> JASSO's scholarship loan(s) <input type="checkbox"/> Internal scholarships <input type="checkbox"/> Private Org/Local Govt scholarships			
Essay *Office use	<input type="checkbox"/> Submitted <input type="checkbox"/> Essay not required		