

*Write clearly in black ink. Do not use erasable ballpoint pens or other ballpoint pen ink that will fade easily over time.

Application No.	
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*Office use

Scholarship Application Form for the 2020 Academic Year

Reference: Application form example (p.32-42 of the 慶應義塾大学大学院奨学金案内 [Keio University Graduate School Scholarship Information Guidebook])

*The page numbers in this document refer to the 慶應義塾大学大学院奨学金案内.

General Information of Applicant

Application Date	(mm/dd/yyyy) / /		
Graduate School:	Low School:	Year:	
Student ID			
<p>I hereby declare that the information given in this application form is true and correct. If I am selected or nominated for a scholarship, I agree to provide the necessary information regarding my enrollment status, academic performance, and financial situation to the university and awarding body, and I understand that the scholarship offer may be withdrawn if I provide any false information in the application documents.</p>			
Full Name (must be written by the applicant)	<input type="checkbox"/> Male / <input type="checkbox"/> Female	Seal	The names must not be written by the same person, and the seals must be different.
Birth	(mm/dd/yyyy) / /	Age:	
Name of Guarantor (must be written by the guarantor)		Relationship to Student	

Contact Information of Applicant:

Address	〒 -
Landline	() -
Mobile	() -
E-mail (keio.jp)	_____@keio.jp
<input type="checkbox"/> Have you registered to use keio.jp?	
<input type="checkbox"/> Have you confirmed whether you can use your keio.jp e-mail address for correspondences regarding scholarships?	
<input type="checkbox"/> Have you set up e-mail forwarding from your keio.jp e-mail address to your personal e-mail account?	

Contact Information of Family:

Address	〒 -
TEL	() -

*Office use	SDST		Check			
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1. Your family and household income *Rounded down to the nearest 10,000 yen unit

Write the number of family members (Number of persons sharing the same household income and expenses, including the applicant)	_____ persons
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(1) Among family members sharing the same household income and expenses (refer to p.33), include information on members besides the applicant and siblings currently attending school or about to attend school. If they are preparatory school students, include in the table below.

Relationship	Code →p.47	Name	Age	Occupation	Salary Income (with tax)	Business Income (with tax)	Business Income (with tax)
Father	01				,000 yen	,000 yen	,000 yen
Mother	02				,000 yen	,000 yen	,000 yen
					X		
					X		
					X		
↓ Fill in if both your parents are not a part of the same household (you have broken off all relations with both of your parents or they have passed away).							
					,000 yen	,000 yen	,000 yen
↓ Fill in if you are applying as an individual living independently.							
Applicant	X						
Spouse	03						

(2) Fill in information on the applicant and siblings currently attending school or about to attend school. Include in (1) if they are preparatory school students.

Relationship	Code	School Code	Status	Institution	Year	Living Situation (Commuting)	Name	Age
Applicant	X	42	Private	Keio University Graduate School		<input type="checkbox"/> At Home <input type="checkbox"/> Away from Home		
			<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At Home <input type="checkbox"/> Away from Home		
			<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At Home <input type="checkbox"/> Away from Home		
			<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At Home <input type="checkbox"/> Away from Home		

(3) and (4) Sources of income for your father and mother

*Check all that apply

*Place a check for "Reemployment" if the family member in question has been employed after mandatory retirement and is receiving a salary from their new place of employment

*You do not have to complete the sections below for parents who have passed away or for parents with whom you do not have any contact (through parental divorce or long-term separation)

(3) Father	<input type="checkbox"/> Salary(<input type="checkbox"/> Reemployment) <input type="checkbox"/> Self-employment or agricultural income <input type="checkbox"/> Public pension(<input type="checkbox"/> Retirement / <input type="checkbox"/> Disability / <input type="checkbox"/> Survivor) <input type="checkbox"/> Corporate pension <input type="checkbox"/> Real estate income <input type="checkbox"/> Miscellaneous income (Details: _____) <input type="checkbox"/> Livelihood protection <input type="checkbox"/> Child rearing allowance <input type="checkbox"/> Retirement money (including retirement money received in the past) <input type="checkbox"/> Other (_____) <input type="checkbox"/> No income
(4) Mother	<input type="checkbox"/> Salary(<input type="checkbox"/> Reemployment) <input type="checkbox"/> Self-employment or agricultural income <input type="checkbox"/> Public pension(<input type="checkbox"/> Retirement / <input type="checkbox"/> Disability / <input type="checkbox"/> Survivor) <input type="checkbox"/> Corporate pension <input type="checkbox"/> Real estate income <input type="checkbox"/> Miscellaneous income (Details: _____) <input type="checkbox"/> Livelihood protection <input type="checkbox"/> Child rearing allowance <input type="checkbox"/> Retirement money (including retirement money received in the past) <input type="checkbox"/> Other (_____) <input type="checkbox"/> No income

(5) If you have parents who have passed away or parents with whom you do not have any contact (parental divorce, long-term separation, parents unmarried, etc.):

My (father / mother) passed away in (month: _____ year: _____) or I have been separated from a parent because of (parental divorce / long-term separation / parents unmarried / other) since (month: _____ year: _____).

If your parent(s) has passed away, are you or your parent receiving survivors pension?
Yes [_____,000 yen per year] / No

• Are you receiving financial assistance, such as educational expenses, from outside the household income?
Yes [_____,000 yen per year] / No

* If you are a single-parent family, you must submit the documents listed on p.31⑩

<If you are applying as an individual living independently, (6) and (7) are not required.>

(6) If your father and/or your mother are unemployed:

*If they are retired, indicate whether they received retirement money by checking the appropriate response.

Father	Unemployed as of (month: _____ year: _____) (Reason: <input type="checkbox"/> Resignation [<input type="checkbox"/> Personal reason / <input type="checkbox"/> Dismissal / <input type="checkbox"/> Retirement] / <input type="checkbox"/> Business closure / <input type="checkbox"/> Other) Unemployment benefit or unemployment insurance (<input type="checkbox"/> Yes / <input type="checkbox"/> No [finished as of month: _____ year: _____] / <input type="checkbox"/> Applied for / <input type="checkbox"/> Planning to apply) Retirement money (<input type="checkbox"/> Yes / <input type="checkbox"/> No) * If you checked "Resignation," provide a "taishoku shōmeisho (certificate of resignation)" (p.30㉗) and "seikatsu jōkyō hōkokusho (Financial Supporter Report)" (p.30㉘). If you checked "Yes" for unemployment benefit or unemployment insurance or indicated that unemployment benefit or unemployment insurance payments have finished, provide a "koyō hoken jyukyū shikakushashō (employment insurance eligibility card)" (p.30㉙). * If you checked "Business closure," provide a "haigyō shōmeisho (document proving business closure)" (p.30㉚) and "seikatsu jōkyō hōkokusho (Financial Supporter Report)" (p.30㉘). •Expected employment (<input type="checkbox"/> Yes [month: _____ year: _____] / <input type="checkbox"/> Currently seeking work / <input type="checkbox"/> None)
Mother	Unemployed as of (month: _____ year: _____) (Reason: <input type="checkbox"/> Resignation [<input type="checkbox"/> Personal reason / <input type="checkbox"/> Dismissal / <input type="checkbox"/> Retirement] / <input type="checkbox"/> Business closure / <input type="checkbox"/> Other) Unemployment benefit or unemployment insurance (<input type="checkbox"/> Yes / <input type="checkbox"/> No [finished as of month: _____ year: _____] / <input type="checkbox"/> Applied for / <input type="checkbox"/> Planning to apply) Retirement money (<input type="checkbox"/> Yes / <input type="checkbox"/> No) * If you checked "Resignation," provide a "taishoku shōmeisho (certificate of resignation)" (p.30㉗) and "seikatsu jōkyō hōkokusho (Financial Supporter Report)" (p.30㉘). If you checked "Yes" for unemployment benefit or unemployment insurance or indicated that unemployment benefit or unemployment insurance payments have finished, provide a "koyō hoken jyukyū shikakushashō (employment insurance eligibility card)" (p.30㉙). * If you checked "Business closure," provide a "haigyō shōmeisho (document proving business closure)" (p.30㉚) and "seikatsu jōkyō hōkokusho (Financial Supporter Report)" (p.30㉘). •Expected employment (<input type="checkbox"/> Yes [month: _____ year: _____] / <input type="checkbox"/> Currently seeking work / <input type="checkbox"/> None)

(7) If your father and/or mother are taking a temporary leave from a job:

My (father / mother) is on a temporary leave from their job as of (month: _____ year: _____)

•Accident and sickness benefits
Yes [_____] yen per month] / Applied for [applied in month: _____ year: _____] / Planning to apply / Expired / No

* If they are currently receiving an accident and sickness benefit, provide a "shōbyō teatekin tsūchisho (notice of accident and sickness benefits indicating the amount of benefits received)," etc., (p.30㉛) and "seikatsu jōkyō hōkokusho (Financial Supporter Report)" (p.30㉘).

<If you are applying as an individual living independently, (8) and (9) are required.>

(8) and (9) Current income of Applicant and their Spouse:

(8) Father	<input type="checkbox"/> Salary(<input type="checkbox"/> Reemployment) <input type="checkbox"/> Self-employment or agricultural income <input type="checkbox"/> Public pension(<input type="checkbox"/> Retirement / <input type="checkbox"/> Disability / <input type="checkbox"/> Survivor) <input type="checkbox"/> Corporate pension <input type="checkbox"/> Real estate income <input type="checkbox"/> Miscellaneous income (Details: _____) <input type="checkbox"/> Livelihood protection <input type="checkbox"/> Child rearing allowance <input type="checkbox"/> Retirement money (including retirement money received in the past) <input type="checkbox"/> Other (_____) <input type="checkbox"/> No income
(9) Mother	<input type="checkbox"/> Salary(<input type="checkbox"/> Reemployment) <input type="checkbox"/> Self-employment or agricultural income <input type="checkbox"/> Public pension(<input type="checkbox"/> Retirement / <input type="checkbox"/> Disability / <input type="checkbox"/> Survivor) <input type="checkbox"/> Corporate pension <input type="checkbox"/> Real estate income <input type="checkbox"/> Miscellaneous income (Details: _____) <input type="checkbox"/> Livelihood protection <input type="checkbox"/> Child rearing allowance <input type="checkbox"/> Retirement money (including retirement money received in the past) <input type="checkbox"/> Other (_____) <input type="checkbox"/> No income

2. Special deduction

(8)	Is your household a single-parent household?	<input type="checkbox"/> Yes / <input type="checkbox"/> No * If you answered "Yes," provide the documents listed in and p.31 ^⑥ and (F).
		* Office use Deductions <input type="checkbox"/> Yes / <input type="checkbox"/> No
(9)	Among family members sharing the same household income and expenses, is there member with a disability or who is bedridden and needs full-time care?	<input type="checkbox"/> Yes (Name: _____) / <input type="checkbox"/> No * If you answered "Yes," provide documents proving disability (p.31 ^⑦).

If (8) and/or (9) above apply to you and you would like to request a special deduction, provide the necessary documents indicated above.

3. Educational history

Provide a complete educational history accounting for all periods. Include information on the high school that you graduated from, and if you have not graduated from a high school, your status after completing high school equivalency examinations or passing the university entrance qualification examinations (e.g. on a temporary leave of absence, changed/transferred universities, withdrawal from university, attended preparatory school [prepared for university entrance exams at home], work history, etc.).

Educational History of Applicant	<input type="checkbox"/> Graduated from () High School Month () Year () – Month () Year () / <input type="checkbox"/> Completed high school equivalency examinations / <input type="checkbox"/> Passed the university entrance qualification examinations.
	Month () Year () – Month () Year () ()
	Month () Year () – Month () Year () ()
	Entered Keio University Faculty of () Department / 学門 <i>Gakumon</i> (applies only to 1st-year Faculty of Science and Technology students) () in Month () Year ()
	Month () Year () – Month () Year () (<input type="checkbox"/> Repeated year / <input type="checkbox"/> Leave of absence / <input type="checkbox"/> Study Abroad)
	Year level () as of Month () Year ()
	Expected to graduate in Month () Year ()

*If you have plans to study abroad for three months or more, indicate the study abroad period below.

Month () Year () – Month () Year ()

4. Bank account details for transferring scholarship money

Enter account details of the student/applicant.

Check the box, if the account details are different from those provided in the application form for the previous academic year.

Name of Financial Institution				Branch Name				Name of Account Holder					
Financial Institution Code			Branch Code			Account Type	Account Number (Enter numbers justified to the right)						
						1							

5. Scholarship application and payment status

Indicate the JASSO's scholarship loan and/or individual application scholarships that you are currently receiving, you have applied for, or you will apply for.

Scholarship Name	Duration (tentative)	Type	Amount (tentative)
JASSO Category 1 Loans	Month () Year () to Month () Year ()	<input type="checkbox"/> Currently Receiving <input type="checkbox"/> Applied for <input type="checkbox"/> Will Apply	Loan Per Month yen
JASSO Category 2 Loans	Month () Year () to Month () Year ()	<input type="checkbox"/> Currently Receiving <input type="checkbox"/> Applied for <input type="checkbox"/> Will Apply	Loan Per Month yen
JASSO Benefit	Month () Year () to Month () Year ()	<input type="checkbox"/> Currently Receiving <input type="checkbox"/> Applied for <input type="checkbox"/> Will Apply	Benefit Per Month yen
	Month () Year () to Month () Year ()	<input type="checkbox"/> Currently Receiving <input type="checkbox"/> Applied for <input type="checkbox"/> Will Apply	<input type="checkbox"/> Benefit <input type="checkbox"/> Loan Per Month / <input type="checkbox"/> Per Year yen
	Month () Year () to Month () Year ()	<input type="checkbox"/> Currently Receiving <input type="checkbox"/> Applied for <input type="checkbox"/> Will Apply	<input type="checkbox"/> Benefit <input type="checkbox"/> Loan Per Month / <input type="checkbox"/> Per Year yen

6. Scholarship loans

If you are currently not receiving a student loan (e.g., JASSO's scholarship loan[s]) or you have no plans to apply for one, indicate the reason.

7. Japan Society for the Promotion of Science (JSPS) (Only for Doctoral Program)

Please check the appropriate one.

Not recruited in 2020

Recruited (to be recruited) in 2020

(Period: ~)

- 本人および、小・中・高等学校・高等専門学校・専修学校(高等課程・専門課程)・大学(短期大学、通信制、専攻科を含む)・大学院の在学者(兄弟姉妹)、および就学前の弟妹を記入してください。
上記以外の、科目等履修生・別科生・聴講生・研究生・予備校生・専修学校生(一般課程)・各種学校生は就学者に該当しません。「1.(1)」の欄(②)に記入し、「職業」欄に各種学校名・予備校名を記入してください。
- 「続柄番号」「学校番号」は下の「続柄番号表」「学校番号表」により該当する番号を記入してください。
- 「在学校」欄は、××小学校、△△高等学校、○○大学等、正式名称を省略せずに記入してください。

続柄番号表

父	01	妹	08
母	02	祖父	09
配偶者	03	祖母	10
子	04	孫	11
兄	05	おじ	12
姉	06	おば	13
弟	07	その他親族	14

学校番号表

小学校		10	専修学校	国・公立	61
中学校		20	・高等課程	私立	62
高等学校	国・公立	31	専修学校	国・公立	71
	私立	32		・専門課程	私立
大学・大学院	国・公立	41	高等専門学校	国・公立 1～3年	81
	私立	42		4・5年	82
				私立 1～3年	83
				4・5年	84