Application Form for Admission Food Examption ato							① *Application		m	1 Exemption and deferment			
Application Form for Admission Fees Exemption						<i>)</i> .	Category		2	2 Exemption	3 Def	erment	
\geq		Furigana		③ Examinee's Number	4	④ Adn	nission ?	Schedule	YY	MM	DD		
	2Name	Enter in Chinese	characteristics or Katakana	5 Enrolled College			School					College	
ppli	◆ Student ID Number												
pplicant	@C	Graduated School							* gr	raduated, lef	t w/o d	iploma	
	⑦p	present address	Ŧ				Tel	()			
	®F	Family address	Ŧ				Tel	()			

					Family Members except Persons Who Attending School							
		Relationship to ap	plicant	ŀ	Applicant	Father	Mother	Spouse	Child			
		Name										
		Age										
		Occupation										
		occupation			(in thousand yen)	(in thousand yen)	(in thousand yen)	(in thousand yen)	(in thousand	l yen) (in th	ousand yen)	(in thousand yen)
		Salary, Wage, Executive Compensa	tion, Part-Tin	ne Job								·
	1. E	(Governmental) Pension, Disa	ability Ben	efit								
⁽⁹⁾ Family and Income	mpl	Unemployment Insurar										
	oyn	Public Assistance	ice									
mi	Employment											
ly a	Ear	Others										
ınd	Earning	Total										
In	04	♦ Administrative Use										
ion	2.	Commerce/Industry/Forestry/ Farming/Fishery										
le	Other	Land Rent, House Rent, Interest, Dividend										
	er tl	Child Support, etc.										
	than	Others										
	Employment Income	Retirement Benefit										
	loyı	E Insurance										
	nen	Dithers ()								
	t Inc	Total		,								
	com	◆ Administrat	ive Use									
	Ċ,											
	App	licant (1)Scholarship									(Estimated annu	al) amount receive
		Scholarship Name	: T							@Status fa	- A V2024 /	thou.yen
E	Relat	tionship Name	Age	Management	School Categories					Status for AY2024 (Only attending a national school in Jackson Ja		Only for students ol in Japan)
))Pe			2	Categories			8		from * Home	Tuition Exer	nption Status	Tuition Fees
rso	App	olicant								1st Semester	2nd Semester	Annual Amount(in thou.)
r su			\swarrow	National	* Elementary	school/Junior High School/Senior High School/College/University College				* N/A	* N/A	Amount(in thou.)
Atte				Public						Total	Total	
end				Private	(School Name) * Elementary	school/Junior High Scho	ol/Senior High School/C	(Grade) College/University Colleg	than Home	Half•Part * N/A	Half•Part * N/A	
ing				National Public		Technology/Vocational			* Home Place other	Total	Total	
Sc				Private	(School Name)			(Grade)	than Home	Half•Part	Half•Part	
Persons Attending School				National Public		school/Junior High Scho Technology/Vocational		College/University Colleg y/Specialized)	e * Home Place other	* N/A Total	* N/A Total	
ĭ				Private	(School Name)			(Grade)	than Home	Half•Part	Half•Part	
	National * Elementary school/Junior High School/Senior High School Public Technology/Vocational School(Upper Second)								e * Home Place other	* N/A Total	* N/A Total	
				Public Private	(School Name)	g)	<u>, 11</u>	(Grade)	than Home	Half•Part	Half • Part	
	Ho	usehold with Disabled	Rel		(School Name)		oove care level 3 /	(Grade)		Half•Part Disability pe		
Ð		usehold with Disabled		Private	(School Name)	X Disabled / Al		(Grade) Other(nsion Y/N	
13S1	Per	rsons	Rel	Private ationship	(School Name) () ()	X Disabled / Al	bove care level 3 /	(Grade) Other(Disability pe	nsion Y/N	
(13)Speci	Per Ho	rsons usehold with Persons	Rel Rel	Private ationship ationship ationship	(School Name) () ()	 ※ Disabled / Al ※ Disabled / Al Name (pove care level 3 / pove care level 3 /	(Grade) Other(than Home))	Disability pe	nsion Y/N nsion Y/N	
[]3Special]	Per Ho Ne	sons usehold with Persons eding Long-Term	Rel Rel Per	Private ationship ationship ationship	(School Name) () () () atment: Since	 ※ Disabled / Al ※ Disabled / Al Name (pove care level 3 / pove care level 3 /	(Grade) Other(Other()	than Home))	Disability pe Disability pe	nsion Y/N nsion Y/N	
^[3] Special Dec	Per Ho Ne	rsons usehold with Persons	Rel Rel Per Rel	Private ationship ationship ationship iod of tre ationship	(School Name) () () () atment: Since ()	X Disabled / Al Disabled / Al Name (yy/mm Name (bove care level 3 / bove care level 3 / Medical	(Grade) Other(Other()	than Home)) otal	Disability pe Disability pe thou.yer	nsion Y/N nsion Y/N	
(13)Special Deduc	Per Ho Ne trea	sons usehold with Persons eding Long-Term	Rel Rel Per Rel Per	Private ationship ationship ationship iod of tre ationship iod of tre	(School Name) () () () atment: Since () atment: Since	X Disabled / Al Disabled / Al Name (yy/mm Name (yy/mm	pove care level 3 / pove care level 3 / Medical Medical	(Grade) Other(Other() treatment Cost To) treatment Cost To	than Home)) otal	Disability pe Disability pe	nsion Y/N nsion Y/N	
⁽¹³⁾ Special Deduction	Per Ho Ne trea Ma	rsons usehold with Persons eding Long-Term atment	Rel Rel Per Rel Per	Private ationship ationship ationship iod of tre ationship iod of tre	(School Name) () () () atment: Since () atment: Since	X Disabled / Al Disabled / Al Name (yy/mm Name (pove care level 3 / pove care level 3 / Medical Medical	(Grade) Other(Other() treatment Cost To)	than Home)) otal dtal	Disability pe Disability pe thou.yer thou.yer	nsion Y/N nsion Y/N	
¹³ Special Deductions	Per Ho Ne trea Ma Liv	rsons usehold with Persons eding Long-Term atment in Financial Supporter <i>r</i> ing Separately aster,Storm/Flood	Rel Per Rel Per Addres	Private ationship ationship ationship iod of tre ationship iod of tre	(School Name) () () () atment: Since () atment: Since time of appli	X Disabled / Al Disabled / Al Name (yy/mm Name (yy/mm	pove care level 3 / pove care level 3 / Medical Medical	(Grade) Other(Other() treatment Cost To) treatment Cost To Separation period	than Home)) otal dd hth	Disability pe Disability pe thou.yer thou.yer	nsion Y/N nsion Y/N n n n nths)	
pecial Deductions	Per Ho Ne trea Ma Liv Disa Dan	usehold with Persons eding Long-Term atment in Financial Supporter /ing Separately aster,Storm/Flood nage,Burglary, etc. Suffered	Rel Per Rel Per Addres	Private ationship ationship iod of tre ationship iod of tre is at the	(School Name) () () () atment: Since () atment: Since time of appli	X Disabled / Al Disabled / Al Name (yy/mm Name (yy/mm	pove care level 3 / pove care level 3 / Medical Medical	(Grade) Other(Other() treatment Cost To) treatment Cost To Separation period	than Home)) otal dd hth	Disability pe Disability pe thou.yer \sim (mo	nsion Y/N nsion Y/N n n n nths)	thou.yen
pecial Deductions	Per Ho Ne trea Liv Disa Dan	rsons usehold with Persons eding Long-Term atment in Financial Supporter <i>r</i> ing Separately aster,Storm/Flood	Rel Per Rel Per Addres Details	Private ationship ationship ationship iod of tre ationship iod of tre is at the od Dam	(School Name) () () () atment: Since () atment: Since time of appli	X Disabled / Al X Disabled / Al Name (yy/mm Name (yy/mm cation period	pove care level 3 / pove care level 3 / Medical Medical	(Grade) Other(Other() treatment Cost To) treatment Cost To Separation perio Year Mor	than Home)) otal dd hth	Disability pe Disability pe thou.yer thou.yer \sim (me ount of Dan	nsion Y/N nsion Y/N n n n nths)	

	Circ	le (\bigcirc) the	appropriate number	in the column below with res	spect to the reasons	for application for exempti	on or deferm	nent of ad	mission fees.	
		ц	(1)		admission fees by the due supporter had damages by v					or the applicant or	
	*	Exemption	(2)		ne exemption applying, the bidable reasons within one y			job loss of	the main	financial	
	*Reasons for Application		(3)	The applicant has e (1) and (2) above.	extremely financial difficult	ty as of the time of	f application due to any of	her special	circumsta	ances similar to	
			(4)	It is difficult to pay records.	admission fees by the due	date because of fi	nancial reasons but the ap	plicant has	excellent	academic	
			(5)		admission fees by the due supporter had damages by v					or the applicant or	
	on	Deferment	(6)	It is deemed difficu financial supporter	It to pay admission fees by of the applicant.	the due date beca	use of unavoidable reason	ns such as jo	b loss of	the main	
16Rea			(7)	It is difficult to pay	admission fees by the due	date because of a	any other special circumst	ances.			
^(I) Reasons for application and family situations	Enter the detail reasons why the applicant needs the exemption/ deferment. [In the case of (3), (4), (7) explain included the "financial reason" All applicants are required to enter in Japanese.										
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suc											
	uner		ymen	ancial supporter is t, enter the source o s	f		I	Possibility o	f employ	ment (Yes / No)	
					nption for 2025 with necess				e disappro	oval or	
the approval of half admission fees exemption, I will apply for the admission fees deferment.I apply for ** 2Admission Fees Exemption for 2025 with necessary documents attached.											
	3 Admission Fees Deferment for 2025 with necessary documents attached. Date:										
	To:	Pre	side	nt of University	of Tsukuba						
					Nan	ne of Applicant [Signature]					
Contac	t in J	Japan	whe	-	r is in Japan (if there is a fa	-	er it in the column of fami	ly address.)			
-	urigana Name				Relationship to Applicant	Address	,	Tel	()	
1 1 all											