Application for the Student Emergency Aid for Continuance of Studies

To:

President of the Japan Student Services Organization (JASSO)

(8 digits)

I hereby apply to the Japan Student Services Organization (JASSO) for the Student Emergency Aid for Continuance of Studies.

If I am currently a JASSO scholarship recipient, I consent to the use of my bank account information in JASSO's possession for transferring the funds for the Student Emergency Aid for Continuance of Studies.

1. Basic Information Submission Date (Year: Month: Date Day: Your School Student ID# Kana (Family Kana (Given Name) Name) Name Kanji Kanji (Given (Family Name) Name) Year: Date of Birth Month: Day: Phone # 2. Bank Transfer Information *JASSO scholars do not need to enter this information. However, if you are a JASSO scholar but if, due to a reason such as the closure of the bank account you have registered with JASSO, there is an obstacle to your receiving the Student Emergency Aid for Continuance of Studies, then enter this information. (JASSO scholars must separately provide notification of changes to their bank account information.) Account Holder Name (Kana) *Enter the account holder name on your passbook. (Applies to institutions other than Japan Post Bank.) Bank Branch Name of Institution & Credit Union Office Branch Agricultural Cooperative Sub-office Bank Code Branch Code Ordinary deposits Account Type Account # *Fill in from right side. (Japan Post Bank) Code (5 digits) Japan Post Bank Number

3. Matters to be notified

*I	Fill out the box below if you wish to have the aids for reasons such as: it is difficult for you to submit
	the required credentials; you have multiple children or single-parent in the household; the situation of
	your application for an individual tuition reduction or exemption at your university or another
	institution, etc. Do not enter questions or other inquiries here, as you will not receive a reply.

*If yo	u are a	a first-yea	r student at	a university	or other	such i	nstitution	and you	lost a p	art-time	job :	you
we	re sche	eduled to	begin or are	experiencin	g other s	uch cire	cumstance	s, please	enter tl	hose deta	ils.	

4. Appended Documentation

*Enter a circle under "Check" next to any of the following documentation that is appended. If none of the listed documentation applies, write the name of the appended documentation and enter a circle next to it under "Check."

Check	Document
	Copy of rental agreement for apartment or other residence (only for students not living in a supporter's residence)
	Copy of deposit passbook (optional)
	Certificate proving receipt of public support in response to the COVID-19 (if available to submit)
	Payment statements from employer for part-time work (before and after reduction in pay. *If the statement showing the reduction in income is for last fiscal year, attach statement showing part-time income during this fiscal year.) (optional)
	Copy of scholarship certificate or others
	Other ()

The information you submit will be used for JASSO's Student Emergency Aid for Continuance of Studies. The information will be provided as necessary to the Ministry of Education, Culture, Sports, Science and Technology, schools, financial institutions, and contractors within the appropriate scope for carrying out this purpose, and shall not be used for any other purpose.

In addition, your information will be provided within the appropriate scope if used for cross-reference to, for example, prevent redundant scholarship payments from administrative organs, public interest corporations, and so on.