

# Financial Aid (Shugakushoreikin) Application Form for Reiwa 6 (2024) Academic Year

Nishinomiya City Board of Education

※ Please make sure to fill out all the boxes with a thick frame.

I apply for the financial aid for the following reason.  
 For the certification of the aid, I consent that Nishinomiya City Board of Education may view the City Tax Rolls or the Child Rearing Allowance Payment Ledger. I also have approval from the family members written below for the viewing.  
 After certification, I entrust the school principal to request and receive the Financial Aid (shugakushoreikin). In order to avoid duplicate payment, I also consent that Nishinomiya City Board of Education to make a reference or notify other municipalities about the current status of financial aid payment.  
 Please make the payment to the bank account I designated. I do not object that this bank transfer ensures the effectiveness of payment.

Date of application	Year	Month	Date
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Reason for application	(Choose the number of the reasons) ※Multiple answers possible	※Please refer to the list of attached documents "reasons for application" and write the number(s) that are applicable to you.
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Address	〒 _____
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Phone number	_____
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Parent's name	Name in katakana
	_____

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Household members	Relation	Name	Birth date
	Student		Name in katakana
		_____	. .
Parent			. .
			. .
			. .
			. .
			. .

※Please write all the members of your household living together and members who are making a living on the same financial basis. (including grandparents, etc.) A family making a living on the same financial basis includes a case which one of the parents has a different resident registration from other members of the household due to reasons such as a job transfer without family. If there is a family member who has a different address than the applicant (parent), please write the address in the empty name space.

When attaching certificates, please glue them on the back.

For school use only	
受付年月日 ( 年 月 日)	
学校長	

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1. First application 2. Continued application			
School name, grade and class	School	Grade	Class
(When transferring, write the name of the current school)		(Do not write the class when it is not decided yet.)	

This box will be filled by the Board of Education							
就 奨 番 号	異動コード	学年	認定	生特	通学	廃止	異動コード
1 学CD 区 番号 C 7	8	9	11	13	14	15	I : 追加 D : 取消 S : 修正
開始年月日	廃止年月日	新学校コード	学籍番号	人数			
16	23	29	30 32	40	106		
5 0 6 0 4 0 1							
開始年月日は申請日に応じて適宜訂正すること。							

※ Please make sure to fill out all the boxes with a thick frame.

The bank account to designate			
Bank name (Bank, Shinkin Bank, Agricultural Cooperative)			Branch name
Bank & branch code		Type of account	Account holder's name in katakana
Bank code	Branch code	Account number	
65	72 73	79 80	99
1			

Write "1" for a savings account. Write 2. for a checking account

Note: Please make sure you fill in the correct information. If there is a false recognition, it will be difficult to make the payment. Right align the account number, and left align the account holder's name. If your name in katakana includes voiced consonant marks (little dashes or a little circle), use a separate cell for those marks.

When designating a Yucho Bank account, make sure to write the branch and account numbers for bank transfers. (Please refer to the bottom of the first page on the bank book.)