

通常給付 記入例

General Payment Entry Example

Fill in the bold-lined area.

Write the date this application was prepared.

第1号様式の1
 高校生等奨学給付金受給申請書
 Application Form for High School Supplemental Scholarship Fund

In case of Kanagawa Prefectural Schools
 In case of Kanagawa Prefectural Schools
 Cases Other than the Above

2024年7月10日

高校生等奨学給付金の受給を申請します。
 I am applying for High School Supplemental Scholarship Fund.

申請者 (保護者等)	ふりがな	かがわ いくお	高校生等との関係	<input checked="" type="checkbox"/> 親権者(父) <input type="checkbox"/> 未成年後見人 <input type="checkbox"/> 主たる生計維持者 <input type="checkbox"/> その他	<input type="checkbox"/> 親権者(母) <input type="checkbox"/> 未成年後見人である里親 <input type="checkbox"/> 生徒本人
	氏名	神奈川 育夫	住所	〒221-0057 横浜市神奈川区青木町00-00-00 日中連絡が取れる電話番号 090-xxxx-xxxx	
申請者 以外の 保護者等	ふりがな	かがわ たかこ	1月1日現在の住所	神奈川県 川崎市 区 町 村 <input type="checkbox"/> I do not have an address in Japan.	
	氏名	神奈川 高子	1月1日現在の住所	神奈川県 川崎市 区 町 村 <input type="checkbox"/> I do not have an address in Japan.	

非課税世帯 ⇒ 【1】～【5】を記入してください。
 <Household Exempted from Taxation> Fill in 【1】～【5】

生活保護受給世帯 ⇒ 【1】～【5】を記入してください。
 <Household on Public Assistance> Fill in 【1】～【5】

【1】対象となる高校生等について
 【Applying Student】

ふりがな	かがわ きょうすけ	昭和 20 年 5 月 5 日 平成
氏名	神奈川 京介	
在学する学校	学校の名称	神奈川県立 〇〇高等学校 1 年
	課程	<input checked="" type="checkbox"/> 全日制 <input type="checkbox"/> 定時制 <input type="checkbox"/> 通信制 <input type="checkbox"/> 専攻科
過去の高等学校等における在学期間	学校名	平成 年 月 日 学校の種類・課程 在学中に給付金を受給した回数
	立	平成 年 月 日 学校の種類・課程 在学中に給付金を受給した回数

【2】扶養親族の状況及び扶養誓約について
 【Dependent Family Members and Assurance】

※Enter only when the applicant is the main earner in home or the household is tax-exempted and the applicant is supporting family member(s) other than described in 【1】.
 <Assurance> Please be sure to confirm the following item and put a check mark on (✓ is a requisite).
 I assure that the relationship between the person in the column of "supporter" and the person(s) described below is equivalent to the relationship between the supporter and dependent(s) defined by the law such as the Health Insurance Act.

Relationship to 【1】	Full Name	Date of Birth	Occupation, Name of School, Grade	Course	Scholarship Fund Payment Applied	Supporter <Entry required> (Put ✓ on Supporter)
Student	Same as 【1】					<input checked="" type="checkbox"/> 申請者 <input type="checkbox"/> 申請者以外の保護者等 <input type="checkbox"/> その他
【High School or Other Secondary School Students】 Write if you are supporting high school student(s) other than "Applying Student" shown above.						
扶養親族の状況	<input type="checkbox"/> Older Brother <input type="checkbox"/> Younger Brother <input type="checkbox"/> Older Sister <input type="checkbox"/> Younger Sister		<input type="checkbox"/> Correspondence <input type="checkbox"/> Advanced Course <input type="checkbox"/> Others	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input checked="" type="checkbox"/> 兄 <input type="checkbox"/> 弟 <input type="checkbox"/> 姉 <input type="checkbox"/> 妹	神奈川 葵子	H18.12.12	国・公立 神奈川県立〇〇高等学校 3 年	<input type="checkbox"/> 通信制 <input checked="" type="checkbox"/> 専攻科 <input type="checkbox"/> 上記以外	<input type="checkbox"/> 有 <input type="checkbox"/> 無 <input type="checkbox"/> 申請者 <input type="checkbox"/> 申請者以外の保護者等 <input type="checkbox"/> その他
	<input type="checkbox"/> 兄 <input type="checkbox"/> 弟 <input type="checkbox"/> 姉 <input type="checkbox"/> 妹			国・公立 私立	高校 年 専攻科 上記以外	<input type="checkbox"/> 有 <input type="checkbox"/> 無 <input type="checkbox"/> 申請者 <input type="checkbox"/> 申請者以外の保護者等 <input type="checkbox"/> その他
<input type="checkbox"/> 兄 <input type="checkbox"/> 弟 <input type="checkbox"/> 姉 <input type="checkbox"/> 妹	神奈川 学	H14.8.8	無職			<input type="checkbox"/> 申請者 <input type="checkbox"/> 申請者以外の保護者等 <input type="checkbox"/> その他
<input type="checkbox"/> 兄 <input type="checkbox"/> 弟 <input type="checkbox"/> 姉 <input type="checkbox"/> 妹	神奈川 教夫	H15.9.9	〇〇〇〇大学 3 年			<input type="checkbox"/> 申請者 <input type="checkbox"/> 申請者以外の保護者等 <input type="checkbox"/> その他

【3】振込先口座
 【Account Information for Direct Deposit】

金融機関名	●● 銀行 信用金庫	支店コード	001	預金種目	普通貯蓄
金融機関コード	1234	支店コード	001	預金種目	普通貯蓄
口座番号	1234567	口座名義人	※カタカナで記入してください かがわ イクオ		

person with parental authority (father)
 person with parental authority (mother)
 guardian of minor
 foster parent as a guardian of minor
 primary earner
 student him/herself
 Other ()

Write address, name and daytime contact number of the parent/guardian (person with parental authority) and check the appropriate box of the relation to the student. If there is a parent/guardian other than the applicant, write the name here and check the appropriate box of the relation to the student. Write the address as of January 1 if it is different from the current address of city/town/village.

Check the appropriate box.

Write student's name and birthdate.

Write about high school enrolled in as of July 1, 2024.

If the student was enrolled in a high school other than the school above before June 30, 2024, write about the school here.

Applicant
 Guardian other than Applicant
 Other ()

< In case the applicant is the main earner in home or there is a dependent family member in a tax-exempted household>
 Be sure to check the column of Assurance.

Also enter the supporting sibling(s) 15 years or older and younger than 23 years old together with the student him/herself and put check marks on applicable boxes.

Write the account information of the applicant.

【4】保護者等の収入の状況について【 Income of Guardian and others】

(1) I am submitting Seikatsuhogo Jukyu Shomeisho (Certificate of receiving Public Assistance) (the certificate that shows you are a recipient of the occupational assistance/school fees for high school).

①	<input type="checkbox"/>	Seikatsuhogo Jukyu Shomeisho (Certificate of receiving Public Assistance) (the certificate that shows you are a recipient of the occupational assistance/school fees for high school)
---	--------------------------	---

Check if the household is receiving public assistance (occupational assistance.)

(2) For the following person, The Taxation Certificate, etc. will be (has been) submitted.
 A copy of the Individual Number Card, etc. will be (has been) submitted.

①	<input checked="" type="checkbox"/>	For two persons with parental authority (both parents)(Even when one of the persons works away from home, submit Kazei Shomeisho for two persons) ・ The student is not yet of age (younger than 18) and has two persons with parental authority (both parents)
---	-------------------------------------	--

②	<input type="checkbox"/>	For one person with parental authority (Except for the head of the Child Consultation Center or the Child Welfare Institution who has legal custody temporarily) ・ There is only one person with parental authority because of divorce or bereavement. ・ Income tax certificate of one of the persons with parental authority cannot be submitted due to domestic violence, neglect, disappearance or other reasons beyond your control though there is another person with parental authority
---	--------------------------	---

③	<input type="checkbox"/>	For () guardians of minor (There is no person with parental authority but the guardian of minor is appointed. (Submit the documents for all of the guardians if there are more than two are appointed.)
---	--------------------------	---

④	<input type="checkbox"/>	For two persons on whose income the student's livelihood is dependent (hereinafter referred to as "the primary earner in home") (such as parents) The student reached the age of maturity while in school, and there is no change in earners in home from the time point immediately before the student reached the age of maturity to the time point of the application.
---	--------------------------	---

Check one of (2) ① through ⑥ or (3) ① if the household is exempted from taxation.
 Check in <Confirmation> also if you prefer income status confirmation using Individual Number.

⑤	<input type="checkbox"/>	For one person on whose income the student's livelihood is dependent (the primary earner in home) ・ The student has not reached the age of maturity yet, but there is no person with parental authority nor guardian of minor. ・ The student was already of age at the time of entering school but there is a primary earner in home. ・ The student is already of age and there was one person with parental authority when the student was a minor. ・ The student is already of age and there was no person with parental authority nor guardian of minor when the student was a minor.
---	--------------------------	---

⑥	<input type="checkbox"/>	For the student himself/herself ・ There is no person with parental authority, no guardian of minor appointed, and no primary earner in home and the student reached the age of maturity
---	--------------------------	---

<Confirmation> Please check the box if you agree on the following matter.

<input type="checkbox"/>	I agree that the income status is confirmed using Individual Number of the guardian and so on entered in application (reporting) for High School Tuition Support Fund or copies of Individual Number card and so on submitted in application (reporting) for High School Tuition Support Fund.
--------------------------	--

(3) I do not submit the documents shown in (1) or (2) for the following reason.

①	<input type="checkbox"/>	The income of the student himself/herself is to be confirmed (the case that there is no person with parental authority, no guardian of minor appointed, and no primary earner in home) but the student is a minor and the income is not enough for taxation of Prefectural tax on income basis and Municipal tax on income basis.
---	--------------------------	---

【5】誓約・委任欄【Promise and Entrustment】※Write the name of the applicant.

I have confirmed and give assurance (authorization) for the following.

Applicant's name **神奈川 青夫**

<For both Households exempted from Taxation and Household on Public Assistance>

- The contents entered in the application form are true and correct. In case if there is any false statement, the paid amount must be returned in full immediately in response to the claim by Kanagawa Prefectural board of education.
- Regarding the student for whom application is made, no application has been made to other prefectures than Kanagawa for High School Supplemental Scholarship Fund.
- As of July 1, the student applying for this High School Supplemental Scholarship Fund is not supported by children welfare institutional benefits (study tour fees or special raising fees, except for high school student in maternal and child living support facility) prescribed in Child Welfare Act.
- If there is any unpaid balance to the school other than tuition, I entrust the school principal to have the scholarship benefits which I receive be made as payment towards such balance.

< For Household exempted from Taxation only>

- The high school student him/herself entered in 【 1 】 is not receiving occupational assistance under the provision of Article 36 in Public Assistance Act (Act No.144 of 1950) as of July 1. (Except for the case where the student is enrolled in an advanced course)

The applicant's own signature is required in the applicant's name column after confirming the contents of the section.
 The payment will not be made if the signature is omitted.

<学校使用欄>
 <学校受付印>

Do not fill in the official use area.

学校の名称 _____ 学校長の氏名 _____ 職印 _____