

To the Kawasaki City Board of Education, Superintendent of Education

[Empty box for Reason for application and date of qualifying event]

I consent to the items of the Agreement below and hereby apply for School Attendance Financial Assistance for FY 2026. I also confirm that there are no discrepancies between items stated in the application form and the attached documents.

Date of application

Name of applicant (guardian's signature)

Applicant's contact phone number

(Please provide a number at which you can be contacted during the day).

Reason for application (circle the appropriate number)

- 1 You are receiving public assistance payments
2 Your public assistance payments were suspended or stopped this fiscal year or last fiscal year
3 You are receiving a Child Support Allowance
4 Income in 2025 was less than the Base Reference Income.
5 Attachment

Reason for application and date of qualifying event where application is submitted in the middle of a fiscal year.

Reason:

Date:

\*If the application form is submitted by the end of the month following the month of the qualifying event, the application will be reviewed using the date of qualifying event as the date received.

Agreement

You must agree to all of the following items when applying for financial assistance for schooling through junior high school graduation (excludes those not qualified).

- 1. If you are renewed as of the end of the current fiscal year (March 31st), you will be considered as a renewal application...
2. Regarding household members in the "Household Circumstances" field below, the Board of Education will refer to their resident register...
3. "Household Circumstances" on the application (and any changes as applicable) are shared with the school by the Board of Education.
4. If you have moved in to a different municipality, the local Board of Education or school will refer/notify the municipality of School Attendance Financial Assistance details.
5. The school principal of the school attended by a child receiving assistance requests School Attendance Financial Assistance funds for allocation to unpaid school fees on behalf of the applicant.
6. There may be cases where payment is made via schools regardless of account information registration.

Account info:

Please circle one of numbers 1-2 to indicate your preferred method for receiving School Attendance Financial payments.

\*If you choose 1, submit a copy (showing your account information and name on the account) of your passbook or cash card for the bank account that you use for transfers.

1 I wish to have the funds transferred to my designated account (payment can only be sent to the account name listed in the "Household Status" column).

Table with columns: Name of account holder (kana), Bank/Agricultural cooperative, Credit union / Credit association, Honten Shiten, Account type, Account number (aligned to the right)

2 No account—request payment via the school

Household situation

Indicate household circumstances. Be sure to include all household members both living together and separately.

To add household members, fill in the required information. To delete members, draw a double line through the person's name, and write the reason in the margin.

\*Where members are in the same household, members are counted regardless of whether they live together or separately, as long as they share daily life expenses.

Table with columns: Name (kanji), Name (kana), Date of birth, Name of school, Grade

\*The matters stated in this Application (and Agreement) will be used only for administration of School Attendance Financial Assistance payments, and due care will be taken to protect personal information when handling this information.

\*If there has been any false information, etc. in matters stated in the application, School Attendance Financial Assistance payments may have to be returned.