

Dear Exchange Partners and Applicants,

The JASSO offeres the students the following:

- ¥80,000 monthly stipend for a specified duration of time (i.e. Six months / one year)
- ¥150,000 relocation allowance (upon arrival).

Please remember that every new EPOK student will need to purchase their airplane tickets by himself/herself.

*We will notify newly accepted EPOK students of when to arrive in Okayama at a later time.

We will pick up each student from either Okayama Airport or JR Okayama Train Station and escort them to the International Student House.

*New students will not be allowed to move into the International Student House before the date which is given.

Further information regarding this scholarship is available at:

http://www.jasso.go.jp/scholarship/short_term_e.html.

短期留学推進制度（受入れ）候補者在籍証明書

Certificate of Enrollment of the Applicant for

JASSO Short-Term Student Exchange Promotion Program (Inbound) Scholarship

独立行政法人日本学生支援機構 理事長 殿

To: President, Japan Student Services Organization (JASSO)

下記の独立行政法人日本学生支援機構短期留学推進制度（受入れ）奨学金等支給申請者は、ここに記載のとおり、本学に在籍していることを証明します。

This is to certify that the following person who is applying for JASSO Short-Term Student Exchange Promotion Program (Inbound) Scholarship is registered as a regular student at our institution in the following capacity.

申請者氏名 Name of applicant	
在籍大学名 Name of institution	
在籍学部/研究科 Faculty / School	
在籍課程/学年 *1 Course / Grade (School year) *1	<input type="checkbox"/> 学部 (Undergraduate) <input type="checkbox"/> 短大 (Junior College) <input type="checkbox"/> 修士 (Master's) <input type="checkbox"/> 博士 (Doctorate) 学年 Grade (School year) _____
卒業/修了予定年月 *2 Expected date of completion / graduation *2	<p style="text-align: center;">年 Year 月 Month</p>
取得予定学位 Degree to be awarded	<input type="checkbox"/> 学士 (Bachelor's degree) <input type="checkbox"/> 準学士 (Associate degree) <input type="checkbox"/> 修士 (Master's degree) 専攻 Major <input type="checkbox"/> 博士 (Doctor's degree) _____
留学先大学名 Host institution in JAPAN	

提出年月日 年 月 日
Date Year Month Day

氏名
Name

職名
Title

署名
Signature

#1 申請時の学年を記入してください。

#1 Please fill in the school year at the time of application.

#2 日本に短期留学した場合の卒業/修了年月日を記入してください。

#2 Expected date of completion/graduation should include the period of study in Japan.

注：申請者の在籍大学の責任者が記入してください。

Note: The authorized person of the applicant's home institution should fill out this form.

※ご記入いただいた情報は、奨学金支給業務のために利用されます。また、行政機関及び公益法人等から奨学金の重複受給の防止等のために照会があった場合は、適正な範囲内においてこの情報が必要に応じて提供されます。

Information submitted here will only be used to the extent of this Program. However, this information, when deemed appropriate, may be presented to administrative institutions and public-service organizations upon request to prevent disbursement of multiple scholarships to a single recipient.