

学生番号 Student Number							
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後期分授業料免除継続申請書
Continuance Application Form for Tuition Fees Exemption
for the Second Semester

Date(YYYY/MM/DD) _____ 年 月 日
/ /

島根大学長 殿
To the President of Shimane University

申請者 (学生本人)
Applicant (the student)

学部(Faculty) _____ 学科(Department) _____
課程(Course) _____ 年(Year) _____
研究科(Graduate School) _____ 専攻(Major) _____

入学年月 : _____ 年 月
Admission date(YYYY/MM) _____ /

フリガナ(Kana (Ruby))
氏 名(Name) : _____

現 住 所(Current Address) : _____

電話番号(Phone Number) : _____

保護者等 (必ず自署)
Guardian,etc (Autograph)

【※独立生計者又は留学生の場合は記入不要です。】

[*If you are self-supporting student or an international student, this is not necessary to fill in]

氏 名(Name) : _____

現 住 所(Current Address) : _____

電話番号(Phone Number) : _____

Tuition fees exemption for the First Semester in the year _____ 年度
[全 額 免 除 / 半 額 免 除], but as of the base date of the
*Encircle one of the them

application for the Second Semester there is no change in my situation including the household size and family income from that at the base date of the application for the First Semester. Jointly with my guardian I state that this fact is true and correct, and apply for the tuition fees exemption for the Second Semester without attachment of the evidential documents etc.

Concerning the application for tuition fees exemption for this year, if falsity is found and granted exemption is revoked because of that, I do no object to it.

住民税非課税世帯 (Household with no residents tax)	0 : 否(not-applicable) 1 : 該当(applicable)
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