

在留資格認定証明書交付申請書 APPLICATION FOR CERTIFICATE OF ELIGIBILITY

法務大臣殿
To the Minister of Justice

出入国管理及び難民認定法第7条の2の規定に基づき、次のとおり同法第7条第1項第2号に掲げる条件に適合している旨の証明書の交付を申請します。
Pursuant to the provisions of Article 7-2 of the Immigration Control and Refugee Recognition Act, I hereby apply for the certificate showing eligibility for the conditions provided for in 7, Paragraph 1, Item 2 of the said Act.

PASTE HERE

写真
Photo
40mm x 30mm

1 国籍・地域 (Fill out your nationality) 2 生年月日 (Date of birth) 2000 年 x 月 x 日

3 氏名 (Family name: WASEDA, Given name: TARO)

4 性別 (Sex) 男 5 出生地 (Place of birth) Changchun, Jilin, China 6 配偶者の有無 (Marital status) 有 無

7 職業 (Occupation) Student 8 本国における居住地 (Home town/city) Beijing, China

9 日本における連絡先 (Address in Japan) 東京都新宿区西早稲田1-6-1

電話番号 (Telephone No.) 03-3203-4141 携帯電話番号 (Cellular phone No.) なし

10 旅券 (1) 番号 (Passport Number) XX123456789 (2) 有効期限 (Date of expiration) 20xx 年 x 月 x 日

11 入国目的 (次の中から該当するものを選んでください。)
 I '教授' / '教育' / '芸術' / '文化活動' / '宗教' / '報道' / '企業内転勤' / '研究(転勤)' / '経営・管理' / '研究' / '技術・人文知識・国際業務' / '看護' / '技能' / '特定活動(研究活動等)' / '特定技能(1号)' / '特定技能(2号)' / '興行' / '留学' / '研修' / 'Y' 技能実習(1号) / '技術実習(2号)' / 'Y' 技能実習(3号) / R '家族滞在' / '特定活動(研究活動等家族)' / R '特定活動(EPA家族)' / T '日本人の配偶者等' / '永住者の配偶者等' / T '定住者' / '高度専門職(1号イ)' / '高度専門職(1号ロ)' / '高度専門職(1号ハ)' / U 'その他'

12 入国予定年月日 (Date of entry) 20xx 年 x 月 x 日 13 上陸予定港 (Port of entry) Narita

14 滞在予定期間 (Intended length of stay) 1 year, 2-year or 3-year 15 同伴者の有無 (Accompanying persons, if any) 有 無

16 査証申請予定地 (Intended place to apply for visa) Beijing

17 過去の出入国履歴 (Past entry into / departure from Japan) 有 / 無

(上記で「有」を選択した場合) (Fill in the followings when the answer is "Yes")
 回数 (回(s)) 1 直近の出入国履歴 (直近の出入国履歴) 2015 年 10 月 1 日 から 2015 年 10 月 20 日

18 犯罪を理由とする処分を受けたことの有無 (日本国外におけるものを含む) (Criminal record (in Japan / overseas)) 有 (具体的内容) 無

19 退去強制又は出国命令による出国の有無 (Departure by deportation / departure order) 有 / 無

(上記で「有」を選択した場合) (Fill in the followings when the answer is "Yes")
 回数 (回(s)) 回 直近の送還履歴 (直近の送還履歴) 年 月 日

20 在日親族(父・母・配偶者・子・兄弟姉妹など)及び同居者 (Family in Japan (Father, Mother, Spouse, Son, Daughter, Brother, Sister or others) or co-residents)
 有 ('有'の場合は、以下の欄に在日親族及び同居者を記入してください。) / 無

続柄 (Relationship)	氏名 (Name)	生年月日 (Date of birth)	国籍・地域 (Nationality/Region)	同居予定の有無 (Intended to reside with applicant or not)	勤務先名称・進学先名称 (Place of employment/School)	在留カード番号 (特別永住者証明書番号) (Residence card number (Special Permanent Resident Certificate number))
NONE				有 / 無		
				有 / 無		
				有 / 無		
				有 / 無		

20については、記載欄が不足する場合は別紙に記入して添付すること。なお、研修、技能実習に係る申請の場合は記載不要です。
 Regarding item 20, if there is not enough space in the given columns to write in all of your family in Japan, fill in and attach a separate sheet.
 In addition, take note that you are not required to fill in item 20 for applications pertaining to "Trainee" / "Technical Intern Training".

(注) 裏面参照の上、申請に必要な書類を作成して下さい。 Note: Please fill in forms required for application. (See notes on reverse side.)

PHOTO REQUIREMENTS

- 40mm x 30mm in dimension
- Look straight ahead and face must be in FULL VIEW
- No hat or head covering s except for religious or medical reasons.
- Nothing in the background
- Must be clearly printed
- Color or black-and-white photograph
- Copy of a photo is NOT acceptable
- Must be taken within the LAST 3 MONTHS before submission
- Write your name on the back side of your photo

3. NAME: Please fill out EXACTLY THE SAME SHOWN IN YOUR PASSPORT. DO NOT fill out in Kanji or Chinese characters.

5. Place of birth and 8. Home town/city: The name of city and country (Not only the country for China and Vietnam, but the city and province necessary)

12. Date of entry: Please write the date (not too early) you plan to enter Japan. (It is tentative, so you do not have to arrive in Japan on the exact date.) Please note that your COE may not be issued in time of your planned date of entry. The recommended date for April enrollees will be during March and for September enrollees will be during August to beginning of September.

13. Port of Entry: Please write the airport at which you intend to arrive. If you plan to land in Tokyo, please write either "Narita" or "Haneda". It is just for reference for the Immigration Bureau. If you enter Japan from other airports, there will be no problem.

14. Intended length of stay: 1 year for research student, 2-year for Master student and 3-year for Doctor student. No other choices.

16. Intended place to apply for visa: Write the name of the location (city) of the Japanese embassy/consulate in your home country or country of residence that you plan to apply for your visa.

17. Past entry into/departure from Japan: If you are uncertain as to the exact number of entries, please write down "multiple" or "many". Please write down the EXACT DATES of your most recent stay in Japan.

20. Family in Japan: If you have no relatives, you MUST fill out "NONE". If you have relatives in Japan, please fill out their information.

1. Please fill out in BLACK ink or type them. Do not use an erasable ink.
 2. Print on one side of sheet only.
 3. For the questions asking yes and no, make sure to select either. Do not leave it out.

21 通学先 Place of study
(1)名称 Name of school 早稲田大学
(2)所在地 Address 東京都新宿区西早稲田1-6-1 (3)電話番号 Telephone No.

22 修学年数 (小学校～最終学歴) Total period of education (from elementary school to last institution of education) 12 年 Years

23 最終学歴 (又は在学中の学校) Education (last school or institution) or present school
(1)在籍状況 Registered enrollment 卒業 Graduated 在学中 In school 休学中 Temporary absence 中退 Withdrawal
大学院(博士) Doctor 大学院(修士) Master 大学 Bachelor 短期大学 Junior college 専門学校 College of technology
高等学校 Senior high school 中学校 Junior high school 小学校 Elementary school その他 Others
(2)学校名 Name of the school High School (3)卒業又は卒業見込み年月 Date of graduation or expected graduation XXXX 年 X 月 Year Month

24
25

26 滞在費の支弁方法等 (生活費、学費及び家賃について記入すること。) 複数選択可
Method of support to pay for expenses while in Japan (fill in with regard to living expenses, tuition and rent) * multiple answers possible
(1)支弁方法及び月平均支弁額 Method of support and an amount of support per month (average)
本人負担 Self 円 Yen 在外経費支弁者負担 Supporter living abroad 250000/per month 円 Yen
在日経費支弁者負担 Supporter in Japan 円 Yen 奨学金 Scholarship 円 Yen
その他 Others 円 Yen
(2)送金・携行等の別 Remittances from abroad or carrying cash
外国からの携行 Carrying from abroad 円 Yen 外国からの送金 Remittances from abroad 3,000,000/year 円 Yen
(携行者 Name of the individual carrying cash) (携行時期 Date and time of carrying cash) その他 Others 円 Yen
(3)経費支弁者 (複数人いる場合は全てについて記入すること。) 任意様式の別紙可
Supporter (if there is more than one, give information on all of the supporters) *another paper may be attached, which does not have to use a prescribed format.
氏名 Name WASEDA ICHIRO
住所 Address 1* Zhong Guan Cun, Hai Dian Qu, Beijing, China 電話番号 Telephone No. Must fill out
職業 (勤務先の名称) Occupation (place of employment) Accountant/ Corp. 電話番号 Telephone No. Must fill out
年収 Annual income fill out in Japanese yen 円 Yen

Do not forget to fill out this part

23. Education or present school: Please select your education status and write down the name of the last school that you have graduated from or expected to graduate.

No need to fill out Section 24 and 25.

26. (1)Method of support and an amount of support per month Please select how you will cover your expenses in Japan and fill out the monthly tuition and living expenses combined. For a year expense, we recommend at least 3 million JPY, so the monthly amount will be 250,000 JPY .

Self : If you will cover your expenses on your own fill out here.
Supporter living abroad: If someone(parents or relatives)will cover your expenses.
Supporter in Japan: If someone living in Japan covers your expenses.
Scholarship : If you are receiving scholarship
Others: If you are receiving living expenses in your Union Pay Card, etc., write the monthly amount in "others" and write "Union Pay Card" in the margin.

(2) Remittances from abroad or carrying cash
Carrying from abroad": Please fill out if you will be carrying cash.
Remittances from Abroad: If someone(parents or relatives) will pay for you, please fill out here.

(3) Supporter
Supporter's name must be the same person stated in the "Certificate of Deposit". Please submit the "Agreement for Defraying Expenses"as well if someone else will cover your expenses. If you will be covering your expenses on your own, you will need to fill out YOUR INFORMATION and your DEPOSIT AMOUNT in this section.

(4) 申請人との関係 (上記(1)で在外経費支弁者負担又は在日経費支弁者負担を選択した場合に記入)

Relationship with the applicant (Check one of the followings when your answer to the question 26(1) is supporter living abroad or Japan)

- 夫 Husband 妻 Wife 父 Father 母 Mother 祖父 Grandfather 祖母 Grandmother 養父 Foster father 養母 Foster mother
- 兄弟姉妹 Brother / Sister 叔父 (伯父)・叔母 (伯母) Uncle / Aunt 受入教育機関 Educational institution 友人・知人 Friend / Acquaintance
- 友人・知人の親族 Relative of friend / acquaintance 取引関係者・現地企業等職員 Business connection / Personnel of local enterprise
- 取引関係者・現地企業等職員の親族 Relative of business connection / personnel of local enterprise その他 () Others

(5) 奨学金支給機関 (上記(1)で奨学金を選択した場合に記入) 複数選択可

Organization which provide scholarship (Check one of the following when the answer to the question 26(1) is scholarship) * multiple answers possible

- 外国政府 Foreign government 日本国政府 Japanese government 地方公共団体 Local government
- 公益社団法人又は公益財団法人 () その他 ()
- Public interest incorporated association / Public interest incorporated foundation Others

Select your plan at the time of application

27 卒業後の予定 Plans after graduation

- 帰国 Return to home country 日本での進学 Enter school of higher education in Japan
- 日本での就職 Find work in Japan その他 () Others

28 本邦における申請人の監護人 (通学先が中学校又は小学校の場合に記入)

Actual guardian in Japan (Fill in the following if the applicant is to study at a junior high school or elementary school)

(1)氏名 Name _____ (2)本人との関係 Relationship with the applicant _____

(3)住所 Address _____

電話番号 Telephone No. _____ 携帯電話番号 Cellular Phone No. _____

Do not need to fill out Section 28 and 29.

29 申請人, 法定代理人, 法第7条の2第2項に規定する代理人 Applicant, legal representative or the authorized representative, prescribed in Paragraph 2 of Article 7-2.

(1)氏名 Name _____ (2)本人との関係 Relationship with the applicant _____

(3)住所 Address _____

電話番号 Telephone No. _____ 携帯電話番号 Cellular Phone No. _____

以上の記載内容は事実と相違ありません。 I hereby declare that the statement given above is true and correct.
申請人(代理人)の署名/申請書作成年月日 Signature of the applicant (representative) / Date of filling in this form

No signature is required 年 Year 月 Month 日 Day

注意 申請書作成後申請までに記載内容に変更が生じた場合, 申請人(代理人)が変更箇所を訂正し, 署名すること。
Attention In cases where descriptions have changed after filling in this application form up until submission of this application, the applicant (representative) must correct the part concerned and sign their name.

取次者 Agent or other authorized person

(1)氏名 Name _____ (2)住所 Address _____

(3)所属機関等 Organization to which the agent belongs _____ 電話番号 Telephone No. _____

1 入学する外国人の氏名
Name of the foreigner to enter school

PLEASE FILL OUT YOUR NAME IN ENGLISH (ALPHABET)

2 通学先 Place of Study

(1) 学校名

Name of School

早稲田大学

(2) 所在地

Address

東京都新宿区大久保3-4-1

電話番号

Telephone No.

03-5286-3808

(3) 法人名

Corporation name

学校法人早稲田大学

(4) 法人番号 (13桁)

Corporation no. (combination of 13 numbers and letters)

5 0 1 1 1 0 5 0 0 0 9 5 3

(5) 授業形態

Type of class

昼間制

Day classes

昼夜間制

Day Evening classes

夜間制

Evening classes

サテライト制 (双方向通信による遠隔授業を受ける場合に記入)

Satellite program (fill in this box when attending remote classes that use two-way communication)

通信制 (単位の一部をビデオ又はインターネット等による教育により取得できる場合を含む。)

Correspondence course (including cases receiving credits for education via video or internet)

(6) 生活指導担当者名 (通学先が専修学校、各種学校、中学校又は小学校の場合に記入)

Name of the resident adviser in Japan (in case that the place of study is an advanced vocational school, vocational school,

junior high school or elementary school)

(7) 学生交換計画の有無及び当該計画の策定主体

有・無

(通学先が高等学校、中学校又は小学校の場合に記入)

Yes / No

Is the applicant participating in a student exchange program? Which organization is in charge of that program?

(when the place of study is senior high school, junior high school or elementary school)

国又は地方公共団体の機関

National or local government

独立行政法人

Incorporated administrative agency

国立大学法人

National university corporation

学校法人

Educational foundation

公益社団法人又は公益財団法人

Public interest incorporated association or public interest incorporated foundation

その他 ()

Others

3 入学年月日

Date of entrance

年

月

日

Year

Month

Day

4 週間授業時間 (予定を含む)

Lesson hours per week (including scheduled lessons)

時間

hour

5 在籍区分 Registration

大学院 (博士)

Doctor

大学院 (修士)

Master

大学院 (研究生/専ら聴講によらない)

Graduate school (Research student / not study through auditing courses exclusively)

大学院 (研究生/専ら聴講による)

Graduate school (Research student / study through auditing courses exclusively)

大学 (学部生)

Undergraduate student

大学 (聴講生・科目等履修生)

University (Auditor elective course student)

大学 (別科生)

University (Japanese language course student)

大学 (研究生/専ら聴講によらない)

University (Research student / not study through auditing courses exclusively)

大学 (研究生/専ら聴講による)

University (Research student / study through auditing courses exclusively)

短期大学 (学科生)

Junior college (Regular student)

短期大学 (聴講生・科目等履修生)

Junior college (Auditor elective course student)

短期大学 (別科生)

Junior college (Japanese language course student)

高等専門学校

Technical school

専修学校 (専門課程)

Advanced vocational school (Specialized course)

専修学校 (高等課程)

Advanced vocational school (Higher course)

専修学校 (一般課程)

Advanced vocational school (General course)

各種学校

Miscellaneous school

日本語教育機関 (専修学校専門課程)

Japanese language institution (Advanced vocational school of specialized course)

日本語教育機関 (専修学校一般課程)

Japanese language institution (Advanced vocational school of general course)

日本語教育機関 (準備教育課程)

Japanese language institution (Preparatory courses)

日本語教育機関 (各種学校)

Japanese language institution (Miscellaneous school)

日本語教育機関 (その他)

Japanese language institution (Others)

高等学校

Senior high school

中学校

Junior high school

小学校

Elementary school

その他 ()

Others

DO NOT FILL OUT ANY OTHER PART EXCEPT YOUR NAME ABOVE

6 学部・課程 Faculty / Course
(5で大学院, 大学, 短期大学(いずれも聴講生・科目等履修生及び研究生の場合を含む)を選択した場合に記入)
(Check the following item(s) if you selected Doctor, Master, Graduate school (Research student), Undergraduate student, University (Auditor elective course student), University (Research student), Junior college (Regular student) or Junior college (Auditor elective course student) as your answer to question 5)

- | | | | | | |
|--|------------------|-----------------|--------------------------|--------------------------------|-----------------------|
| 法学
Law | 経済学
Economics | 政治学
Politics | 商学
Commercial science | 経営学
Business administration | 文学
Literature |
| 語学
Linguistics | 社会学
Sociology | 歴史学
History | 心理学
Psychology | 教育学
Education | 芸術学
Science of art |
| その他人文・社会科学 ()
Others(cultural science/ social science) | | | 理学
Science | 化学
Chemistry | 工学
Engineer |
| 農学
Agriculture | 水産学
Fisheries | 薬学
Pharmacy | 体育学
Sports science | その他 ()
Others | |

MAKE SURE THAT ENGINEER IS SELECTED

7 所属予定の研究室 (5で大学院を選択した場合に記入)
Research room (Fill in the following item(s) if you selected Doctor, Master or Graduate school (Research student) as your answer to question 5)

(1)研究室名
Name of research room _____

(2)指導教員氏名
Name of mentoring professor _____

8 専門課程名称 (5で高等専門学校～各種学校を選択した場合に記入)
Name of specialized course (Check the following item(s) if you selected "Technical school" through to "Miscellaneous school" as your answer to question 5)

- | | | | | |
|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|-----------|
| 工業
Engineering | 農業
Agriculture | 医療・衛生
Medical services / Hygienics | 教育・社会福祉
Education / Social welfare | 法律
Law |
| 商業実務
Practical commercial business | 服飾家政
Dress design / Home economics | 文化・教養
Culture / Education | その他 ()
Others | |

9 仲介業者又は仲介者 (5で日本語教育機関を選択した場合に記入)
Name of intermediary agency or person (Fill in the following item(s) if you selected Japanese language institution as your answer to question 5)

(1)名称
Name _____

(2)本国政府による登録番号 (ベトナムの場合に記入)
Registration number issued by the government (Fill in the following item if the applicant is a Vietnamese national) _____

10 卒業までの年月 (予定) Scheduled period of education until graduation _____ 年 _____ 月
(交換留学生の場合, 交換留学受入満了までの年月) _____ Year(s) _____ Month(s)
(If the applicant is an exchange student, fill in the scheduled period of education until the end of the exchange)

以上の記載内容は事実と相違ありません。 I hereby declare that the statement given above is true and correct.

通学先又は所属機関名, 代表者氏名の記名及び押印 / 申請書作成年月日
Name of the place of study or organization and representative, and official seal of the organization / Date of filling in this form

早稲田大学 理工学術院長 竹内淳
Seal Year Month Day

注意 Attention

申請書作成後申請までに記載内容に変更が生じた場合, 所属機関等が変更箇所を訂正し, 押印すること。
In cases where descriptions have changed after filling in this application form up until submission of this application, the organization must correct the part concerned and press its seal on the correction.