

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

To the Director General of 東京 入国管理局長 殿
Regional Immigration Bureau

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.



1 国籍・地域 Nationality/Region 2 生年月日 Date of birth 年 Year 月 Month 日 Day

3 氏名 Name 4 性別 Sex 男 Male / 女 Female 5 出生地 Place of birth 6 配偶者の有無 Marital status 有 Married / 無 Single

7 職業 Occupation Student 8 本国における居住地 Home town/city

9 日本における連絡先 Address in Japan 東京都新宿区西早稲田1-7-14 4F
電話番号 Telephone No. 03-3207-1454 携帯電話番号 Cellular phone No. N/A(なし)

10 旅券 (1)番号 Passport Number (2)有効期限 Date of expiration 年 Year 月 Month 日 Day

11 入国目的 (次のいずれか該当するものを選んでください。) Purpose of entry: check one of the followings
I「教授」 "Professor" I「教育」 "Instructor" J「芸術」 "Artist" J「文化活動」 "Cultural Activities" K「宗教」 "Religious Activities" L「報道」 "Journalist"
L「企業内転勤」 "Intra-company Transferee" M「経営・管理」 "Business Manager" L「研究(転勤)」 "Researcher (Transferee)"
N「研究」 "Researcher" N「技術・人文知識・国際業務」 "Engineer / Specialist in Humanities / International Services" N「技能」 "Skilled Labor"
N「特定活動(研究活動等)」 "Designated Activities (Researcher or IT engineer of a designated org)" O「興行」 "Entertainer" P「留学」 "Student" Q「研修」 "Trainee" Y「技能実習(1号)」 "Technical Intern Training (1)"
R「家族滞在」 "Dependent" R「特定活動(研究活動等家族)」 "Designated Activities (Dependent of Researcher or IT engineer of a designated org)" R「特定活動(EPA家族)」 "Designated Activities(Dependent of EPA)"
T「日本人の配偶者等」 "Spouse or Child of Japanese National" T「永住者の配偶者等」 "Spouse or Child of Permanent Resident" T「定住者」 "Long Term Resident"
「高度専門職(1号イ)」 "Highly Skilled Professional(i)(a)" 「高度専門職(1号ロ)」 "Highly Skilled Professional(i)(b)" 「高度専門職(1号ハ)」 "Highly Skilled Professional(i)(c)" U「その他」 "Others"

12 入国予定年月日 Date of entry 年 Year 月 Month 日 Day 13 上陸予定港 Port of entry

14 滞在予定期間 Intended length of stay 15 同伴者の有無 Accompanying persons, if any 有 Yes / 無 No

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

17 過去の出入国歴 Past entry into / departure from Japan 有 Yes / 無 No
(上記で『有』を選択した場合) (Fill in the followings when the answer is "Yes")
回数 回 time(s) 直近の出入国歴 The latest entry from 年 Year 月 Month 日 Day から Day to 年 Year 月 Month 日 Day

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 Yes (Detail:) / 無 No

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 Yes / 無 No
(上記で『有』を選択した場合) (Fill in the followings when the answer is "Yes")
回数 回 time(s) 直近の送還歴 The latest departure by deportation 年 Year 月 Month 日 Day

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

Table with 7 columns: 続柄 Relationship, 氏名 Name, 生年月日 Date of birth, 国籍・地域 Nationality/Region, 同居予定 Intended to reside with applicant or not, 勤務先・通学先 Place of employment/school, 在留カード番号 Special Permanent Resident Certificate number. Includes rows for family members and co-residents.

※ 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".

21 通学先 Place of study
 (1) 名称 早稲田大学
 Name of school _____
 (2) 所在地 東京都新宿区西早稲田1-6-1 (3) 電話番号 03-3203-1454
 Address _____ Telephone No. _____

22 修学年数 (小学校～最終学歴) 年
 Total period of education (from elementary school to last institution of education) _____ 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 卒業 在学中 休学中 中退
 Registered enrollment Graduated In school Temporary absence Withdrawal
 大学院 (博士) 大学院 (修士) 大学 短期大学 専門学校
 Doctor Master Bachelor Junior college College of technology
 高等学校 中学校 小学校 その他 ()
 Senior high school Junior high school Elementary school Others
 (2) 学校名 (3) 卒業又は卒業見込み年月 年 月
 Name of the school _____ Date of graduation or expected graduation _____ Year _____ Month _____

24 日本語能力 (専修学校又は各種学校において日本語教育以外の教育を受ける場合に記入)
 Japanese language ability (Fill in the followings when the applicant plans to study at advanced vocational school or vocational school (except Japanese language))
 試験による証明 Proof based on a Japanese language test
 (1) 試験名 Name of the test (2) 級又は点数 Attained level or score

日本語教育を受けた教育機関及び期間 Organization and period to have received Japanese language education
 機関名 Organization _____
 期間: 年 月 から 年 月 まで
 Period from _____ Year _____ Month _____ to _____ Year _____ Month _____

その他 Others _____

25 日本語学習歴 (高等学校において教育を受ける場合に記入)
 Japanese education history (Fill in the followings when the applicant plans to study in high school)
 日本語の教育又は日本語による教育を受けた教育機関及び期間
 Organization and period to have received Japanese language education / received education by Japanese language
 機関名 Organization _____
 期間: 年 月 から 年 月 まで
 Period from _____ Year _____ Month _____ to _____ Year _____ Month _____

26 滞在費の支弁方法等 Method of support to pay for expenses while in Japan
 (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 円 在外経費支弁者負担 円
 Self _____ Yen Supporter living abroad _____ Yen
 在日経費支弁者負担 円 奨学金 円
 Supporter in Japan _____ Yen Scholarship _____ Yen
 その他 円
 Others _____ Yen

(2) 送金・携行等の別 Remittances from abroad or carrying cash
 外国からの携行 円 外国からの送金 円
 Carrying from abroad _____ Yen Remittances from abroad _____ Yen
 (携行者 携行時期) その他 円
 Name of the individual _____ Date and time of _____ Others _____ Yen
 carrying cash _____ carrying cash _____

(3) 経費支弁者 Supporter
 ① 氏名 Name _____
 ② 住所 Address _____ 電話番号 Telephone No. _____
 ③ 職業 (勤務先の名称) Occupation (place of employment) _____ 電話番号 Telephone No. _____
 ④ 年収 Annual income _____ 円 Yen _____

- (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 妻 父 母 祖父 祖母 養父 養母
 Husband Wife Father Mother Grandfather Grandmother Foster father Foster mother
- 兄弟姉妹 叔父(伯父)・叔母(伯母) 受入教育機関 友人・知人
 Brother / Sister Uncle / Aunt Educational institution Friend / Acquaintance
- 友人・知人の親族 取引関係者・現地企業等職員
 Relative of friend / acquaintance Business connection / Personnel of local enterprise
- 取引関係者・現地企業等職員の親族 その他 ()
 Relative of business connection / personnel of local enterprise 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)
 Organization which provide scholarship (Check one of the following when the answer to the question 26(1) is scholarship)
- 外国政府 日本国政府 地方公共団体
 Foreign government Japanese government 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

27 卒業後の予定 Plans after graduation

- 帰国 日本での進学
 Return to home country Enter school of higher education in Japan
- 日本での就職 その他 ()
 Find work in Japan 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 (2) 本人との関係
 Name Relationship with the applicant
- (3) 住所
 Address
- 電話番号 携帯電話番号
 Telephone No. Cellular Phone No.

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 (2) 本人との関係 受入れ教育機関の職員
 Name Relationship with the applicant
- (3) 住所 東京都新宿区西早稲田1-7-14 4F
 Address
- 電話番号 携帯電話番号
 Telephone No. 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

年 月 日
 Year Month 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 (2) 住所
 Name Address
- (3) 所属機関等 電話番号
 Organization to which the agent belongs Telephone No.

◆Application materials for EX/DD Program WASEDA University

Written Oath for Defraying Expenses

To Waseda University

Nationality: _____
Full Name(Applicant): _____
Date of Birth: _____ / _____ / _____ (male / female)
(day / month / year)

I agree to defray all costs for the above person during his/her stay in Japan, and therefore I will explain the circumstances of this agreement below.

1. Reason for defraying his/her expenses

Please explain in detail the circumstances where you agree to defray the applicant's costs and your relationship to him/her:

2. Particulars of Agreement

I (the defrayer), , hereby, agree to defray the costs of the above person during his/her stay in Japan. In order to prove that I have defrayed his/her living expenses, I also agree to provide documents, such as copies of proof of telegraphic transfer or of his/her bank account book, when he/she applies for an extension of period of stay.

1) Living Expenses: monthly amount _____ yen

2) Method of payment (Please explain in detail, e.g. bank transfer, money order, etc.)

_____ / _____ / _____
day / month / year

Name of person defraying expenses:

_____(Family) _____(Given) _____(Middle)

Address: _____ TEL _____

Full Name (Signature): _____ Seal(if any)

Relationship to applicant: _____

Completion Guide

Application for Certificate of Eligibility (COE)

1. The Certificate of Eligibility (COE) is an official document issued by the Ministry of Justice. It is necessary for the "Student" Visa.

Waseda University will apply for the COE at the Tokyo (or Fukuoka in case of IPS) Regional Immigration Bureau on behalf of entering students, and send the certificate to your home University as soon as it has been issued.

Please submit the COE along with your visa application when you apply for the visa at your nearest Japanese embassy or consulate.

2. A face-and-shoulder (plain background) color photo (3x4cm) should be firmly pasted in the space indicated on the application form.

*The photograph must have been taken within 3 months of submission.

*Write your name on the back of the photograph.

*Color copy is not acceptable.

3. Please carefully complete the form and follow the instructions provided.

4. Please use one-sided printed paper.

5. If you are handwriting the forms, please make sure to use a black ballpoint pen. Do not use a pencil or an erasable ballpoint pen.

6. If any of your documents are incomplete, your application cannot be processed.

<<Japanese Citizenship>>

Under the Japanese Immigration Law, those who have a Japanese citizenship, including dual citizenship holders, **MUST** enter Japan as "Japanese" with your Japanese Passport. If you violate the law, you may be denied entry into Japan.

Please write with a BLACK pen not with the ballpoint pen with erasable ink.

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

You may use Japanese or English.



- 1.Applicant
- 2.Hatless and Full-faced
- 3.Without Background
- 4.Clearly printed
- 5.Your name on the back
- 6.A color or black-and-white photograph
- 7. A copy of a photo is not acceptable.

To the Director General

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.

1 国籍・地域 **China** 2 生年月日 年 月 日

Write your name in alphabetic letters exactly as it is written in your passport. (Don't write your name in KANJI.)

3 氏名 **WASEDA TARO**

4 性別 男 / Female 5 出生地 **China Jilin Changchun** 6 配偶者の有無 有 / Single

Country and City Name

7 職業 **Student** 8 本国における居住地 **China Beijing**

9 日本における連絡先 **〒169-0051東京都新宿区西早稲田1-7-14-4F**

10 旅券 (1)番号 **XX123456789** (2)有効期限 **20xx** 年 x 月 x 日

Write your passport number.

- 11 入国目的 (次のいずれか該当するものを選んでください。)
- I「教授」 I「教育」 J「芸術」 K「宗教」 L「報道」
 - L「企業内転勤」 M「経営・管理」 L「研究(転勤)」
 - N「研究」 N「技術・人文知識・国際業務」 N「技能」
 - N「特定活動(研究活動等)」 O「興行」 P「留学」 Q「研修」 Y「技能実習(1号)」
 - R「家族滞在」 R「特定活動(研究活動等家族)」 R「特定活動(FPA家族)」
 - T「日本人の配偶者等」 T「永住者の配偶者」
 - U「高度専門職(1号イ)」 U「高度専門職(1号ロ)」 U「高度専門職(1号ハ)」 U「Other」

If your study period is a full academic year, please fill out "1 year". If your study period is one semester, please fill out "6 months".

Please write the airport at which you intend to arrive. If you plan to land in Tokyo, please write either "Narita" or "Haneda".

12 入国予定年月日 **1 year** 13 上陸予定港 **Narita**

You do not need to fill out section 12.

Please apply for your visa at the Japanese consulate or embassy closest to where you currently live.

14 滞在予定期間 **1 year** 15 同伴者の有無 有 / No

Please write down the EXACT DATES of your most recent stay in Japan.

16 査証申請予定地 **Beijing**

17 過去の出入国歴 有 / No
回数 **1** 直近の出入国歴 **2015** 年 **10** 月 **1** 日から **2015** 年 **10** 月 **20** 日

If you are uncertain as to the exact number of entries, please write down "multiple" or "many".

18 犯罪を理由とする処分を有(具体的内容) 有 / No

19 退去強制又は出国命令による出国の有無 有 / No
回数 回 直近の送還歴 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

続柄 Relationship	氏名 Name	生年月日 Date of birth	国籍・地域 Nationality/Region	同居予定 Intended to reside with applicant or not	勤務先・通学先 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
	N/A			はい/いいえ Yes/No		
				YES/NO はい/いいえ Yes/No		

Please write down "None" or "N/A", if you don't have any family or co-residents in Japan.

※ 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.)

21 通学先 Place of study

(1) 名称 Name of school

(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. 03-3203-4141

■ Undergraduate Students: Total Period of education should be 12 years or more
 ■ Graduate Students: Total Period of education should be 16 years or more

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

大学院 (博士) Doctor 大学院 (修士) Master 大学 Bachelor 短大 Junior college

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 ○○University

(3) 卒業又は卒業見込み年月 Date of graduation or expected graduation 2017 年 5 月 Year Month

■ Undergraduate Students: Please tick "Bachelor"
 ■ Graduate Students: Please tick "Doctor" or "Master"

24 Do not need to fill out this section 24 and 25.

25 Section 26 must be filled out completely. Please prepare over ¥80,000 per month for living expenses.
 (Ex: As for one year living expenses, ¥80,000 (or more) × 12months=¥960,000(or more))

26 滞在費の支弁方法等 Method of support to pay for expenses while in Japan

(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 Yen

在外経費支弁者負担 Supporter living abroad 80,000 Yen

在日経費支弁者負担 Supporter in Japan Yen

奨学金 Scholarship Yen

その他 Others Yen

(2) 送金 from abroad 80,000 Yen

(携行者) その他 Others Yen

Per month. These should be the same amount.

Please fill out this section if you ticked "supporter living abroad" or "supporter in Japan" in Question 26(1).

Supporter must be the same as person indicated on the "Written Oath for Defraying Expenses" and "Bank Balance Certificate".

(3) 経費支弁者 Supporter

① 氏名 Name Waseda Jiro

② 住所 Address 1* Zhong Guan Cun, Hai Dian Qu, Beijing

③ 職業 (勤務先の名称) Occupation (place of employment) Maneger/Waseda

④ 年収 Annual income 3,000,000 Yen

電話番号 Telephone No. 012-345678

電話番号 Telephone No. 2345-6789

Do not forget to fill in both numbers.

Please fill out the amount in Japanese yen.

(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 妻 父 母 祖父 祖母 養父 養母
Husband Wife Father Mother Grandfather Grandmother Foster father Foster mother
- 兄弟姉妹 叔父 (伯父)・叔母 (伯母) 受入教育機関 友人・知人
Brother / Sister Uncle / Aunt Educational institution Friend / Acquaintance
- 友人・知人の親族 取引関係者・現地企業等職員
Relative of friend / acquaintance Business connection / Personnel of local enterprise
- 取引関係者・現地企業等職員の親族 その他 ()
Relative of business connection / personnel of local enterprise 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)
Organization which provide scholarship (Check one of the following when the answer to the question 26(1) is scholarship)

- 外国政府 日本国政府 地方公共団体
Foreign government Japanese government 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

27

28

29

Do not need to fill out Section 27, 28 and 29.

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◆Application materials for EX/DD Program WASEDA University

Written Oath for Defraying Expenses

To Waseda University

Nationality: Japanese
Full Name(Applicant): Waseda Taro
Date of Birth: dd / mm / yyyy (male female)
(day / month / year)

I agree to defray all costs for the above person during his/her stay in Japan, and therefore I will explain the circumstances of this agreement below.

1. Reason for defraying his/her expenses

Please explain in detail the circumstances where you agree to defray the applicant's costs and your relationship to him/her:

Your financial supporter must fill out here.

2. Particulars of Agreement

I (the defrayer), hereby, agree to defray the costs of the above person during his/her stay in Japan. In order to prove that I have defrayed his/her living expenses, I also agree to provide documents, such as copies of proof of telegraphic transfer or of his/her bank account book, when he/she applies for an extension of period of stay.

1) Living Expenses: monthly amount 80,000 yen
2) Method of payment (Please explain in detail, e.g. bank transfer, money order, etc.)

Bank transfer

Suggested minimum amount of money is at least 80,000JPY/month.

Your financial supporter's name must be the same as person indicated on the "COE application No.26 (3)" and "Bank Balance Certificate".

dd / mm / yyyy
day / month / year

Name of person defraying expenses: Waseda Jiro
(Family) (Given) (Middle)
Address: 1-17-14 Nishiwaseda Shinjuku-ku, 169-0051, Tokyo Japan TEL: +81-3-3207-1454
Full Name (Signature): Waseda Jiro Seal(if any)
Relationship to applicant: Father