(New Application • Renewal)

Name of the school: OOO Elementary School

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Application / Consent / Authorization Form on the School Expense Allowance (school year 2024-2025)

To the Superintendent of the Oyama Board of Education

Application Date: 2024/4/10

In applying for the school expeses allowance, I understand and agree to the terms below.

- a) The Oyama Board of Education can refer to the resident registry and the payment record of civic tax. They are also authorized to check other information such as claims to public assistance, child-raising allowance and loans from the life welfare fund on behalf of myself and I reside with.
- b) Case workers or the Oyama Board of Education are authorized to make home visits to discuss or investigate my or my dependants home and financial situation.
- c) If the application is found to be false or untrue in any way, the Oyama Board of Education can cancel the approval of this assistance.

d) In the case that the application is cancelled or denied during the school year, I will refund the amount as required immediately.

e) I delegate all of the authority associated with the demand, reception and payment of the allowance to the principal of the school. With this delegation, he/she is authorized to deal with the payment which is covered by the allowance if I default on it.

f) When this application is approved, the Oyama Board of Education can provide that information to the case workers.

≫ Ple	ase fill in the info	mation below	۷.							
Applicant Information	Current Address	C	Housing Situation (Circle the appropriate option)							
						Phone Number		1. Own house		
	Name	Sakurako ()moigawa	ЕD		XXX-XXXX-XXXX		(Mortgage: Y / N) (If Y: yen / m)		
ant]	Relationship to student(s)		DOB	yyyy/mm/		Occupation/ work place	Part-time		2. Rental house (Rent: 45,000 yen / m)	
Applic		Mother	19	785/3/9			(OC Corporation)			
	Address on Jan. 1st	XIf you were not an Oyama resident on Jan. 1st, 2024, please fill in.								
Reas	on for application	(Please circl	e one or mo	ore.)						
(1. Taking civic ta	x exemption o	or reduction			_	ach the docum		-	
	2. Taking self-employment / real estate tax reduction.									
	3. Defered payment of National Health Insurance. <u>Jan. 1st, 2024, documents of</u> should be attached.)								all nousenoid members	
	4. Taking National Pension installation reduction.								on Jan. 1st, <mark>2024</mark> , the	
(5. Taking the child-raising allowance. documents are not requiered.									
	6. Taking a loan from the life welfare fund.									
7. Cannot afford children's school fee due to financial hardship (Please write below). (Explain your condition in detail) My children's father and I are no longer in contact, he does not offer a										
								not offer any		
financial support, and even daily expenses are burden for us.										
≪Infc	ormation about Stu	dent(s) who a	attend public	schools in O	yama and ne	ed the allow	ance.>>			
	Name of the school			grade		Student name		Date o	f birth (yyyy/mm/dd)	
Student Information	OO Elementary School			6	Masamitsu Omoigawa			2012/8/16		
	OO Elementary School		4	Momoko Omoigawa			2014/10/7			
Student										
0)										

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\ll About other family members / roommates \gg

XIf you live with your grandparents, relatives or roommates, please write about them whether you are registered as a family or not. In order to calculate your household income, the income of everyone living in your residense together is required. XIf the income of all the members in your household is not declared, your application may be invalid.

	Relationship to Name		Date of birth (yyyy/mm/dd)	Occupation (work place) or name of school(s)	
Family member / roommate Information	Grandfather	Yoshio Omoigawa	1962/7/10	N/A	
	Grandmother	Kinuko Omoigawa	1965/2/8	Part-time (△△ Inc.)	
	Older sister	Ramu Omoigawa	2008/5/26	○○ High school ○th grade	
	Uncle Wataru Omoigawa		1987/6/15	Full-time (△△ Mart)	
Fa					
can re	each you.	visit your house to talk with you (<u>This r</u> 6 a.m. / p.m <mark>. We</mark> ekends: Around 10		<u>s)</u> . Please let us know when we	

~~~~~~This is the end of the form for guardians. School staff will fill in the forms below.~~~~~~~~~~

## 【学校記入欄】

◆学校生活状況等に関する情報(□のいずれかにチェックをお願いします。 ※複数可)

- □ 保護者の職業が不安定で、経済的に困窮していると認められる。
- □ 経済的困窮により、学校納付金を減免している。
- □ 経済的困窮により、学校納付金が滞りがちである。
- 口 衣服や学用品、通学用品等に不自由している様子が見られる。
- □ 経済的理由による欠席日数が多い。
- □ 上記項目には該当しない。
- □ その他(具体的に記載してください)

◆学校長の意見(□のいずれかにチェックをお願いします。)

※学校長意見が直接認定結果に反映されるわけではありません。参考とさせていただくものです。

- □ 就学援助が必要と考える
- □ 就学援助は不要と考える
- □ その他(具体的に記載してください)

◆民生委員の調査 (有・無)

[Inquiry]Gakko-shien-gakari, Kyoiku-somu-ka, Oyama-shi Kyoiku-iinkai 0285(22)9642 or schools\_