

## Statement of Financial Resources

Full Name : \_\_\_\_\_

Date of Birth : \_\_\_\_\_ (Gender : M / F )  
(yyyy/mm/dd)

理工学研究科/Graduate School of Science and Technology

Name of Program: \_\_\_\_\_

Name of Course: \_\_\_\_\_

Please check the boxes () who will be the financial sponsor for the applicant while residing in Japan and write the annual amount in Japanese Yen which will be provided to you.

A	B
<input type="checkbox"/> by Applicant	¥ _____ / 1 year
<input type="checkbox"/> by Relative	¥ _____ / 1 year
<input type="checkbox"/> by Government or Foundation	¥ _____ / 1 year
<input type="checkbox"/> Other ( _____ )	¥ _____ / 1 year
<b>Total :</b>	¥ _____ / 1 year