

Application Form for 2019 School Expense Subsidies

To: Toyonaka City Superintendent of Education

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I hereby apply for the School Subsidy (hereafter "the Subsidy"). Please transfer the Subsidy into the bank account mentioned below.

I consent to the City checking my taxation record to confirm the income of those in the same household when my application is reviewed.

I also have no objection to the City inquiring with the school before paying the Subsidy concerning my child's attendance at a school trip or a school camp, or my payment for the expense that will be covered. Should I fail to pay the expense for school supplies, the fee for a school trip or a school camp, I will not object if the City deposits the Subsidy directly into the bank account of the principal. Should I fail to pay the fees for school lunches, I will not object if the City pays the Subsidy directly to the Mayor of Toyonaka City.

If there is an overpayment for the school lunch fee, please refund the balance into the bank account mentioned below.

I declare that the information contained in the application form is true. In case it turns out to be untrue, I will not object to the cancellation of decision of payment or to the order for returning the

Parent/Guardian

Personal Seal

Address Toyonaka City

Telephone () Mobile Phone ()

1. Were all of the household members in registered in Toyonaka as of January 1, 2019?

Yes

No → ① Move-in date / ② The municipality you were registered in as of Jan 1, 2019 Prefecture City/Town Have you brought an income certificate issued by your previous municipality? Yes / No

2. Have you received benefits for school supplies for starting school (or other benefits for the same purpose such as "School Preparation Money") from another municipality? No / Yes

3. Enter the following information of all household members who share the same livelihood.

| Enter O for the child to be covered | Pronunciation Name | Relationship | Date of birth | Source of income in 2018 | | | | Student | Name of Elementary or Junior High School | Grade |
|-------------------------------------|--------------------|--------------|---------------|--------------------------|---------------|---------------|------|---------|--|-------|
| | | | | Salary/Wages | Self-employed | Part time job | None | Pension | | |
| | | Householder | . | | | | | | | |
| | | | . | | | | | | Elementary Junior High | |
| | | | . | | | | | | Elementary Junior High | |
| | | | . | | | | | | Elementary Junior High | |
| | | | . | | | | | | Elementary Junior High | |
| | | | . | | | | | | Elementary Junior High | |

4. Please tick all boxes that apply.

※複数あてはまる場合はそれぞれに記入してください。

- ☐ Out of work (since year month)
- ☐ Single-parent family (since year month)
- ☐ Parent/guardian turns 55 before April 2019. (Born on March 31, 1965 or before)
- ☐ Household with a disabled person

雇用保険受給資格者証・離職票・廃業届のいずれか

有・無

児童扶養手当受給者証
ひとり親家庭医療証

有・無 確認印
□要確認

身体障害者手帳
療育手帳
精神障害者保健福祉手帳

該当者名
有・無 確認印

5. Enter the information of the receiving bank account held by a parent/guardian

備考

| | | | |
|-------------------------------|---|-----------------|--------------------|
| Bank Code | Bank ・ Shinkin ・ JA Credit Cooperative ・ Labor Bank | Type of account | 1. Futsu (Savings) |
| Branch Number | Branch | Account no | |
| Account holder in katakana | Account holder in katakana | | |

※Be sure to provide the bank account under parent's name. If possible, please provide the bank account registered for payment of school expenses.

Receipt of Application Form for School Expense Subsidies 2019

* Please enter the name of the person who has actually come to the desk.

| | |
|-------------------|--|
| Name of Applicant | |
|-------------------|--|

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Keep this receipt until you receive the result of the review.

※Invalid unless stamped on the right.

※We will send the result of the review around the end of July to those who applied during the main reception period.

※In case you have not declared your income or your application is incomplete, the notice of result and payment may be delayed, even if you apply during the period above.

※Please contact below, if you move out of Toyonaka and send your child to a school outside of the City while benefiting from this subsidy.

※In regard to the expenses required for school education, be sure to make payment to the school and the School Lunch Division, even if you complete this application.

※If your application is approved, before we pay you the Subsidy, we will check the conditions of your child's attendance to a school trip or school camp and of your payment of expenses that will be covered by the Subsidy and those for school lunches.

※If you have not paid the fees for school supplies, a school trip, or a school camp, we may make the payment directly to the principal. If you have not paid the fees for school lunches, we may make the payment directly to the Mayor of Toyonaka City. If there is an overpayment for the school lunch fee, we will refund the balance into the bank account mentioned above.

Gakumu Section, Educational General Affairs Division, Secretariat, Toyonaka City Board of Education (6F, Bldg. 1)
Tel. 06-6858-2553