

別記第六号の三様式 (第六条の二関係)

申請人等作成用 1

For applicant, part 1

日本国政府法務省

Ministry of Justice, Government of Japan

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
掲げる条件に適合している旨の証明書の交付を
Pursuant to the provisions of Article 7-2 of the Immigration
the certificate showing eligibility for the conditions provided

Blue letter: Common items

Red letter: Items which
depend on the applicants

写 真

Photo

40mm × 30mm

1 国籍・地域 Nationality/Region	USA	2 生年月日 Date of birth	2002 年 10 月 1 日
3 氏名 Name	SMITH JOHN	4 性別 Sex	男 Male
5 出生地 Place of birth	New York, New York, USA	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	Seattle, Washington, USA
9 日本における連絡先 Address in Japan	2500 Hassaka-cho, Hikone-City, Shiga 522-8533		
電話番号 Telephone No.	0749-28-8200	携帯電話番号 Cellular phone No.	
10 旅券 (1) 番号 Passport Number	XX0123456	(2) 有効期限 Date of expiration	2033 年 12 月 31 日
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" ☐ L「研究(転勤)」 "Researcher (Transferee)" ☐ M「経営・管理」 "Business Manager" ☐ N「研究」 "Researcher" ☐ N「介護」 "Nursing Care" ☐ 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)" ☐ N「技術・人文知識・国際業務」 "Engineer / Specialist in Humanities / International Services" ☐ N「特定活動(本邦大学卒業生)」 "Designated Activities (Graduate from a university in Japan)" ☐ V「特定技能(1号)」 "Specified Skilled Worker (i)" ☐ V「特定技能(2号)」 "Specified Skilled Worker (ii)" ☐ O「興行」 "Entertainer" ☒ P「留学」 "Student" ☐ Q「研修」 "Trainee" ☐ Y「技能実習(1号)」 "Technical Intern Training (i)" ☐ Y「技能実習(2号)」 "Technical Intern Training (ii)" ☐ Y「技能実習(3号)」 "Technical Intern Training (iii)" ☐ 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「高度専門職(1号)」 "Highly Skilled Professional(i)(a)" ☐ T「高度専門職(2号)」 "Highly Skilled Professional(ii)(b)" ☐ T「高度専門職(3号)」 "Highly Skilled Professional(iii)(c)" ☐ U「その他」 "Others"		
12 入国予定年月日 Date of entry	2025 年 3 月 25 日	13 上陸予定空港 Port of entry	Kansai International Airport
14 滞在予定期間 Intended length of stay	6 months / 1 year	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	Edinburgh	17 過去の出入国歴 Past entry into / departure from Japan	有 Yes / 無 No
18 過去の在留資格認定証明書交付申請歴 Past history of applying for a certificate of eligibility	有 Yes / 無 No		
19 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。) ※交通違反等による処分を含む。 Criminal record (in Japan / overseas) ※Including dispositions due to traffic violations, etc. Yes (具体的内容) (Detail):) / 無 No			
20 退去強制又は出国命令による出国の有無 Departure by deportation / departure order (上記で「有」を選択した場合) 回数 有 Yes / 無 No 直近の送還歴 (Fill in the followings when the answer is "Yes") 年 月 日			
21 在日親族(父・母・配偶者・子・兄弟姉妹・祖父母・叔(伯)父・叔(伯)母など)及び同居者 Family in Japan (father, mother, spouse, children, siblings, grandparents, uncle, aunt and others) and anyone you currently reside with 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 No Yes (if yes, please fill in your family members in Japan and anyone you currently reside with in the following columns.) / No			

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・通学先名称 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
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		

※ 3について、有効な旅券を所持する場合は、旅券の身分事項ページのとおりに記載してください。
Regarding item 3, if you possess your valid passport, please fill in your name as shown in the passport.
21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、「在日親族」のみ記載してください。
Regarding item 21, 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 only required to fill in your family members in Japan for applications pertaining to "Trainee" or "Technical Intern Training".

Please write your full name as
same as on your passport.Name of the city and the
country where you were born.Name of the city and the
country where you live now.An airport where you are
planning to enter into Japan.Please submit a copy of the passport
stamp page and the visa, if you have
visited Japan before.No.17 through No.20
If you have any record of entry into
Japan or application for a Certificate
of Eligibility, please fill in the
ACCURATE information. The
Immigration Bureau will check your
record strictly. If you fail to report
accurate information, the issuance
of your Certificate of Eligibility may
be delayed, or in the worst case,
never be issued.

(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.)

(注) 申請書に事実と異なる記載をしたことが判明した場合には、不利益な扱いを受けることがあります。

Note: In case of to be found that you have misrepresented the facts in an application, you will be unfavorably treated in the process.

申請人等作成用 2 P (「留学」)

For applicant, part 2 P ("Student")

Blue letter: Common items Red letter: Items

資格認定証明書用
Certificate of eligibility

22 通学先 Place of study
(1)名称 The University of Shiga Prefecture
Name of school
(2)所在地 2500 Hassaka-cho, Hikone-City, Shiga 522-8533
Address
(3)電話番号 0749-28-8200
Telephone No.

23 修学年数 (小学校～最終学歴) 14 年
Total period of education (from elementary school to last institution of education) Years

24 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 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 University of Fountain
Name of the school
(3)卒業又は卒業見込み年月 2027 年 6 月
Date of graduation or expected graduation Year Month

25 経歴 (直近5年の職歴及び学歴 (高等学校卒業以降のものに限る) を記入)
Personal history (Work experience and educational background for the last 5 years (limited to those after graduating from senior high school))

始期 Start		終期 Finish		経歴 Personal history	始期 Start		終期 Finish		経歴 Personal history
年 Year	月 Month	年 Year	月 Month		年 Year	月 Month	年 Year	月 Month	
20XX	XX	20XX	XX	Flower high school					
20XX	XX	20XX	XX	University of Fountain					

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27

28 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 20,000 円 Yen ☒ 在外経費支弁者負担 60,000 円 Yen
Self Supporter living abroad

☐ 在日経費支弁者負担 円 Yen ☒ 奨学金 40,000 円 Yen
Supporter in Japan Scholarship

☐ その他 円 Yen
Others

(2) 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.

①氏名 Smith, William
Name

②住所 123 South Avenue, Los Angeles, CA
Address

③職業 (勤務先の名称) Doctor (Titan Hospital)
Occupation (place of employment)

④年収 5,000,000 円 Yen
Annual income

電話番号 Telephone No. (213) 617-6700

電話番号 Telephone No. (213) 617-6727

Please write the total years of your education.

Please write your educational background for the last 5 years (limited to those after graduating from high school), including above No. 24 "Education or present school" the total years of your education.

No. 28(1)
• Who will cover your living expenses, yourself or a family member or other dependent? Check the box that applies and enter an approximate amount. If your supporter pays for the expenses, please write her/his information at (2).

• If you get any scholarship for this exchange program, please fill in the amount per month and enter the organization by checking the box at (4).

No. 28(2)
• If your family member supports your living expenses in Japan, please fill in the name, full address, occupation and annual income.

(3)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 27(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

(4)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 27(1) is scholarship) multiple answers possible

- ☐ 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 / Others
 Public interest incorporated foundation

29 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

Blue letter: Common items
Red letter: Items which depend on the applicants

If you receive any scholarship and fill in any amount of the "Scholarship" in the column for No.28(1), please check the organization which provides it.

You don't have to fill in No.30 and No.31.
Please keep these columns blank.

