Application for payment prior to starting school

Application for Subsidies for Expenses Related to Starting School, 2027-28 Academic Year
(includes Details of Household and Proxy Declaration) Ⓔ

To the Mayor, Higashihiroshima City

If you need to make a correction, do not use correction tape.
Do not use erasable pens.

Example and Notes

I hereby apply as following, enclosing documents for proof as necessary.

Child's school (planned)	Grade	Furigana / Child's name	Sex	Date of birth
Higashihiroshima Municipal Higashihiroshima Elementary School	New 1	ヒガシ　ヒロシ / Higashi Hiroshi	(M)・F	2020 Y 4 M 4 D
Municipal School	New		(M)・F	Y M D
Municipal School	New 1		(M)・F	Y M D

Please write the child's name, with furigana.

【1】Please fill in details of all household members, including the child and the parents/guardians.

Household details	Relationship	Name	Date of birth	Occupation or school	Type of accommodation	Notes
	Child	Higashi Hiroshi	2020Y 4M 4D	New 1st grade, Higashihiroshima Elementary School	1 Own house (Including accommodation owned by the family)	
	Father	Higashi Gaku	1986Y 5M 5D	Self-employed		
	Mother	Higashi Kotomi	1987Y 6M 6D	Self-employed		
	Sister	Higashi Kyoko	2021Y 7M 7D	Higashihiroshima Nursery School		
	Living in same accommodation	I In	1972Y 8M 8D	○○ Industries	(2) Rented (Including public accommodation) Monthly rent 60,000 Yen	
			Y M D			
			Y M D			
			Y M D			

Please fill in details of household members.

Please circle one of the options. If you are living in rented accommodation, be sure to write the monthly rent.

【2】Please write a circle in the box to the left of all of the conditions that apply, and be sure to fill in the reason for applying in the ※ space.

Reasons for applying		
	／	1 Receiving welfare payments — You are not eligible to receive school expenses subsidies.
	○	2 Exempted from Municipal Tax (all household members)
		3 Fully or partially exempted from Municipal Tax (all household members)
		4 Fully or partially exempted from Fixed Assets Tax (all household members)
		5 Exempted from paying premiums for the National Pension Program (all household members)
		6 Fully or partially exempted from paying premiums for the National Health Insurance Scheme (all household members)
		7 Receiving Child-rearing Allowance
	○	8 Other reasons relating to financial circumstances

Please write a circle against all that apply.

※Please fill in a concrete reason for applying.

Be sure to fill this in.

Ex 1 **I have lost my job as a result of the downturn in the economy, and it's hard to make ends meet.**

Ex 2 **I am a single mother, and I only work part-time, so my income is low.**

Ex 3 **I am self-employed, but my business is not so successful.**

My income is not fixed, and it's hard to make ends meet.

(Continues on reverse)

【3】Applicant (parent/guardian) Please fill in the account of the applicant.

Account for payments

Financial institution		Branch name
Higashihiroshima 銀行 (circled) 組合 / 金庫 農協		Saijo Branch (circled) / Sub-branch

Type of account	Account number (fill in from right)	Account holder's name (in katakana)
(1) Normal / 2 Savings	1 2 3 4 5 6 7	ヒガシ　マナブ

Consent・Proxy・Applicant

・If necessary during the assessment process, I consent to checks being made of public records, etc., and contact being made with relevant organizations, in order to confirm details.

・If having received the payment of subsidies for expenses involved in my child starting a new school before my child starts that school, if I subsequently become ineligible to have received that payment, I agree to repay the entire sum received.

・If I am judged eligible to receive subsidies for school expenses, I consent to the subsidies paid before my child starts school being paid by bank transfer into the account specified by the parent/guardian.

Be sure to fill in everything.

2026Y　12M　10D

Be sure to fill in the date.

Address: 3-301, 8-29 Saijo Sakae-machi, Higashihiroshima City

Applicant (parent/guardian) Higashi Manabu

Contact (home) 082 - 111 - 2222

Contact (mobile) 090 - 3333 - 4444