

Application Form for School Expense Assistance
(Oct. 2025 -Sep. 2026) [Front side]

(school use only)				
School code				

(To) Board of Education

application date	Y	M	D
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I hereby apply for School Expense Assistance and agree with conditions 1-6 below:

1. Sapporo City Board of Education will obtain data on resident registration, income, tax amounts, welfare assistance, and child-care allowance (*Jido Fuyo Teate*) of the applicant and his/her household members, directly from the concerned departments of Sapporo City to the extent necessary for examination.
2. Sapporo City Board of Education will inform the school where a child listed in ② is (will be) enrolled of the result and progress of the examination.
- 3.(For junior high school students only) Sapporo City Board of Education will inform the relevant department of the content of the examination for the 'Sapporo Manabi Support Project'.
4. The school lunch and school trip expenses provided to my household will be received by the Mayor of Sapporo or the school principal on my behalf and will be used for school lunch and school trip expenses.
5. If I fail to pay expenses to the school by the deadline, the school principal will receive the school supplies and school trip fees provided to my household on my behalf and apply them to the repayment of the delinquent amount.
6. In the event that I have improperly received school expenses through misrepresentation, etc., I will return the entire amount.

① Applicant (The bank account holder) *Must be a guardian [Please make sure to fill out all the items]

katakana		Date of birth	Y	M	D
Name		Phone#			
Address	〒 -				
Current occupation	<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school student <input type="checkbox"/> High school student and below		Income of 2024	Yes had income	No income
			If received this assistance after Oct. 2025 in other city, write the city's name.		

②Name(s) of eligible child(ren) (who are enrolled in elementary, junior high schools in FY 2025 and who will enroll in elementary school in April 2026)
*For children who are going to enter elementary school, write the school name and '予定' ("Scheduled") in the 'Grade' column

Name	Date of Birth	School Name	Grade
Katakana			
Name	Y M D		
Katakana			
Name	Y M D		
Katakana			
Name	Y M D		
Katakana			
Name	Y M D		
Katakana			
Name	Y M D		

③Names of all household members other than child(ren) listed in ②. In principle, include persons who live together or spouse lives separately.

Name	Relationship	Date of Birth	Curent occupation	Income of 2024
Katakana			<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school students <input type="checkbox"/> High school students and below	Yes · No
Name				
Katakana			<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school students <input type="checkbox"/> High school students and below	Yes · No
Name				
Katakana			<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school students <input type="checkbox"/> High school students and below	Yes · No
Name				
Katakana			<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school students <input type="checkbox"/> High school students and below	Yes · No
Name				
Katakana			<input type="checkbox"/> Employee/Public employee <input type="checkbox"/> Self-employed <input type="checkbox"/> Part-time worker <input type="checkbox"/> Unemployed <input type="checkbox"/> University/technical school students <input type="checkbox"/> High school students and below	Yes · No
Name				

④ Reason for application (Circle an applicable number)

- 1 Welfare assistance was cancelled or suspended in or after Oct. 2024.
- 2 Received child-care allowance (*Jido Fuyo Teate*) in or after Nov. 2024.
- 3 All household members are exempt from municipal tax in FY2025.
- 4 Total income of all household members in 2024 was less than the limit.
- 5 Individual enterprise tax was fully exempted in or after FY2024.
- 6 Received loans from Social Welfare Council in or after FY2024.

⑤ If you are a single-parent householder and not receiving child-care allowance(*Jido Fuyo Teate*), circle the appropriate reason.

- 1 My application is currently proceeding (undecided)
- 2 Income has exceeded the set limit
- 3 I am receiving disability pension and/or survivor's pension
- 4 I am in the process of divorce mediation or trial with a spouse
- 5 Other (

(school use only)	
<input type="checkbox"/> 特別支援教育就学奨励費からの変更申請 <input type="checkbox"/> 世帯構成の変更に伴う再申請 (事実発生日: 令和 年 月 日)	
審査	
学校受付	特記事項
令和 年 月 日 学校	認・否 月

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⑥ Bank account to receive School Expense Assistance

(The name of the account holder must be the same as the applicant provided in ①)

Bank name	North Pacific Bank(0501)・Hokkaido Bank(0116) Japan Post Bank(9900)・Other (Branch name	Head office・() Branch
Bank code	Branch code	Account number (to the right)	

Please attach a copy of your passbook here

- Attach a copy of the passbook of the above account (a page showing the "bank name, branch name/code, type of account, account number, and account holder's name in Katakana").
- If you use an account that does not have a passbook, a copy of the cash card or the schreen shot of net banking is also acceptable, but please include the name of bank, branch name and code, type of account, account number, and name in Katakana.
- The name of the account holder must be the same as the applicant provided in ① on the front side. We cannot accept an account in the name of anyone other than the applicant, even if he/she is a member of the same household.
- Only saving account is acceptable. Other types of bank account cannot be handled.
- If you use Japan Post Bank, please make sure that the receiving account from other bank will be shown.

Japan Post Bank

Numbers in this field is not necessary...

The numbers on the top left is not necessary. Make sure you attach the part showing the 店名(branch name), 店番(branch number), deposit category and account number.

Make a photocopy of this part ↓

この口座を他金融機関からの振込の受取口座として利用される際は次の内容をご指定ください
【店名】九七八(読み キユウナナハチ)
【店番】978【預金種目】普通預金【口座番号】1234567

Bank account other than Japan Post Bank
(ex. North Pacific Bank)

北洋銀行総合口座(普通預金・定期預金)
総合口座をご利用いただきありがとうございます。

サッポロ 様
店番 普通預金口座番号 定期預金口座番号 発行日
476 1234567 23-11-24

Make a photocopy of the page that shows your name(katakana), branch number, account number and branch name.

お引き出し店 白石中央 支店 TEL (011)861-8231

Please note that the School Expense Assistance cannot be transferred if your account information is not provided correctly.