THE U.S.-JAPAN COUNCIL TOSHIZO WATANABE STUDY ABROAD SCHOLARSHIP

2025-26 Financial Certification Form – Japanese Applicants 財政援助証明書

(合計費用の推定額)



TO BE COMPL	ETED BY THE STUDENT			
Please complete	this section prior to giving to a school	l administrator. Make sur	e you provide the	administrator with
the necessary in	formation about your proposed study	abroad program so s/he ca	n complete the for	m.
Scholarship D	Disbursement Information			
If selected for	the scholarship, please identify wh	ich institution you wou	ıld like to receive	e the award funds.*
U.SJapan Co	uncil (USJC) cannot disburse the fu	ands directly to you, the	e student. (select	one)
(○ Home college/university	O Host coll	lege/university/p	provider
	annot guarantee payment to your	designated institution.		
•	ent POC Information			
would need to administrator	tify a payment point of contact (paying contact in order to make the scholar that completes this certification form who fills out certification form, as lost	rship payment. The payr . The payment POC can	nent POC can be be the same perso	different from the
Division				
Name				
Title				
Email				
permission to Signature: NSTRUCTIONS	complete this form on my behalf ir		anabe Study Abi	-
This form must be	completed by the knowledgeable represe	ntative of either the studen	t's home or host ins	titution.
ADMINISTRATO		is planning to stu	idy abroad in the	Linited States
This form certif	ies tnat[
	-26 academic year. 5/ne is pianning <u>l (SAB) Costs</u>	g o z itena [for an academic year.
student to parti- nformation pro pased on our es	ady abroad program type, the total cipate if accepted is outlined below ovided on the student's scholarship timates. Please enter the actual cos れた留学費用と同じ内容を記入す	 This information show application form. The last even if they exceed the 	ıld correspond w imits (e.g. \$1,000	rith the financial max per year) are
	Program Tuition (学費・在籍)		亨	
	om and Board (滞在費・ミ	ールプラン)		
	Books/Material (書籍/教材費) (
	Transportation (飛行機代等交通			1
	Health Insurance (医療保険代			
	Miscellaneous (雑費) (\$1,000 m	•		1
	Total Estimated Cost of Att			1

\$ 0.00

Existing Financial Support									
1. Does s/he currently receive any financial support (e.g. scholarship(s), loan, grant, work study) that s/he will be able to apply to study abroad costs in the 2025-26 school year?									
現在、2025年度の学期に充てられる奨学金などの財政援助を受けていますか?									
	○ Yes ○ No								
If YES, please list						mou	nt in the c	hart belo	ow:
受けている場合						iale a	/leo zwill ot	tardar abar	o
**Please make sure the amounts listed below are applied to <i>the period in which s/he will study abroad</i> ** CAN IT BE CAN IT BE									
FINANCIAL SUPPORT TYPE	APPLIED STUDY ABF			FINANCIAL SUPPORT TYPE		PE	APPLIED TO AMOU STUDY ABROAD?		AMOUNT
SCHOLARSHIPS 寄付奨学金	Yes	No	If yes, list amount	LOANS / OTHER ローン・その他	~		Yes	No	If yes, list amount
	8	8						0	
	ŏ	ŏ						ŏ	
Family Contribution 家族からのサポート	8	8						0	
Total Scholarship Amount That Can Be Applied to Study Abroad \$0.00 Total Loan & Other Am				Amount	\$ 0.00				
2. Is the student able to combine <u>all</u> of the above listed financial support (items selected "Yes") with the Watanabe Scholarship? 上に"Yes"と記入された財政援助は <u>全て</u> 渡邉奨学金と併用可能ですか? O Yes (併用可能) No (併用不可能)									
If NO, please explain (併用不可能な場合、 奨学金名と理由をご記入ください):									
<u>Calculating Financial Need</u> The formula below will be used to determine the amount of the scholarship the student needs for his/her study abroad (SAB) cost. The fields will be automatically populated and calculated through the digital entries you made on this form.									
Total Estimated SAB Co of Attendance (COA) 合計費用の推定額	est minus	Amount of confirmed financial resources 財政援助(確定済み)		equals	Amount to request for the Watanabe Scholarship (Gap/Financial Need) 申請額				
\$ 0.00	_		\$ 0.00		=	\$ 0.00			
Administrator Informa	ation_								
Name									
Job Title									
Institution									
Email									
	·			·		_	· · · · · · · · · · · · · · · · · · ·		I

A

Name	
Job Title	
Institution	
Email	
Phone	
I (administrato	r) certify the above financial information is accurate and correct as of the date listed below.
Signature:	Date: 10/03/1990

Please Return Completed Form to Student in a PDF file.

Questions? Email us at WatanabeScholarship@usjapancouncil.org