

Statement of Financial Eligibility

To Soka University President,

Applicant's name: _____

Nationality: _____

Date of birth: _____ Sex : M / F

I hereby agree to become the financial supporter of the above applicant during his/her stay in Japan and declare that the information given in this form is true and accurate.

1. Relationship to the applicant and how you have become his/her financial supporter

2. I agree to become the above applicant's financial supporter during his/her stay in Japan and declare to support him/her as follows:

1) Tuition: _____ yen per year

2) Living expenses: _____ yen per month

3) Means of payment (i.e. remittance, bank transfer, etc):

Upon his/her application for visa extension, I will present documents (i.e. copy of remittance statement or bankbook) to certify my financial eligibility to support the applicant.

Name: _____ Signature: _____

Date: _____

Relationship to the applicant: _____

Address: _____ Tel: _____