

受験番号 Examinee's Number	申請者氏名 Name of Applicant
---------------------------	----------------------------

無職の申立書 Statement of Unemployment

島根大学長 殿
To President of Shimane University

(申立人)
(Presenter)

氏名
Name

(申請者との続柄)
Relationship between the Applicant

島根大学の入学料免除・徴収猶予申請に際し、下記のとおり相違ないことを申し立てます。
I hereby aver that the statement below is true and correct concerning application for admission fee exemption/grace of payment at Shimane University.

記(Details)

(申立人記入)
(To be entered by Presenter)

生年月日 Date of birth	年 月 日 (YYYY/MM/DD) / /
住所 Address	
無職である理由 Reason for unemployment	
前職の有無 (いずれかに○) Was there former job? (Circle either one)	有 【退職日】 年 月 日 【退職金】 有・無 Yes 【Date of retirement(YYYY/MM/DD)] / / 【Severance pay】 Yes / No 無 No
失業給付受給の有無 (いずれかに○) Presence or absence of unemployment benefits (Circle one of them)	雇用保険加入有 (失業給付申請中・受給中・受給終了・受給対象外) Insured against unemployment insurance (now applying/ receiving benefits/ finished receiving benefits/ not eligible) 雇用保険加入無 Not insured against unemployment insurance.
現在の生活費の出所 Source of revenue for living expenses now	

上記のとおり相違ないことを確認します。
I confirm that the above statement is true and correct.

年 月 日
Date(YYYY/MM/DD) / /

(家計支持者)
(Person responsible for household budget)

氏名(Name)
(Be sure to self-sign)

(申請者との続柄)
Relationship between the Applicant