Application Form for the Semmoto Scholarship, Spring 2026 Intake (Page 1)

			I understood that I mee					moto Foundation oply.		
Signat Appl (handv					Application Date			,		
1.Your Name		Surname			Given name			Middle name		
in Roman letters										
in Katakana										
2.Gender		☐ Male ☐ Female ☐ Other 3.Nationali		ty						
4.Date of Birth			уууу		mm		dd	Please attach a photo (4 cm × 3 cm) taken		
5.Current Address							within the last six months, and write your name and nationality on the back.			
6Phone Number										
7.E-mail								<u> </u>		
8.(1)Name of School										
8.(2)Faculty /		(not required for Japanese language school students)								
Department /										
Graduate School 9.(1)Year of Study as		Expected Enrollment in								
of the End of		☑ Master's program,year 1(Oct 2025 Entry) ☐ Master's Program in April								
December 2025		2026								
9.(2)Name of		(To be completed by applicable applicants only)								
Graduate School /										
Program to be										
Enrolled from April										
2026		<u> </u>								
9.(3)Educa	tional and b	mploymer	nt History af	ter High Sc	hool (admis:	sion, gradu	ation, emplo	oyment, resignation)		
Year Month		Name of School / Company					admission, graduation, employment, resignation			

Application Form for the Semmoto Scholarship, Spring 2026 Intake (Page 2)

10.Financial Situation									
(1) Allowance		yen / month	Rem (Relatio	nitter nship):					
(2) Other Scholarships / Financial Aid		yen / month	Name of Supporting Organization:						
(3) Personal Income		yen / month		of Income (e.g., part-time job details)					
(4) Other Sources of Income		yen / month	Details:						
(5) Total Income		yen / month	Remarks:						
(6) Rent		yen / month	Remarks:						
(7) Utilities		yen / month	Remarks:						
(8) Communication Expenses		yen / month	Remarks:						
(9) Communication Expenses		yen / month	Remarks:						
(10) Total Expenditures		yen / month	Remarks:						
(11) Please list an	y other scholarships	or grants	you are cı	rrently ap	plying for.				
Name of S	Amount Granted			Date of	Result	Eligik	ility for		
	Р	7 mount Grantou			Announ	cement	1	ent Awards	
							□ YES	□ NO	
							□ YES	□ NO	
							□ YES	□ NO	
							□ YES	□ NO	
(->		_					□ YES	□ NO	
(12) If you are awarded a scholarship that cannot be held concurrently with others, please indicate your preferred order of scholarships to receive.									
				Name	e of Schola	arship			
1st C									
2nd C	Choice								
3rd C									
4th C	hoice								
5th C									

Application Form for the Semmoto Scholarship, Spring 2026 Intake (Page 3)

11. Fami	y Informat	tion								
Relation ship		Name	Age		Occupation	Annual Income		Place of Work / School		
12. Lang	uage Profi	ciency								
(1) Eng	lish (only	if you have to	aken a test/exa	ım)					
TO	FFI	Score	Da	ite	of Examination					
101	-1 L	Score	D.		nost recent) of Examination					
IEL	.TS	Score			nost recent)					
(2) Lan	guages ot	her than you	r native langua		, English, or Japanes	e (if applic	cable)			
Language					Level of Profic	iency				
Lang	uage				Level of Profic	iency				
Lang	uage				Level of Profic	iency				
Lang					Level of Profic	iency				
13. Special Skills or Achievements other than L										
						,				