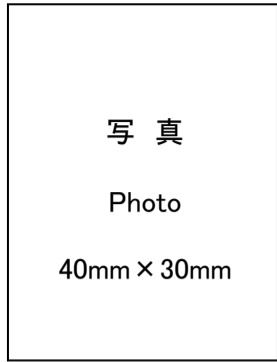


Fill out either JN or EN in Black Inc pen. NO frixon pen allowed. Single side print only.

在留期間更新許可申請書
APPLICATION FOR EXTENSION OF PERIOD OF STAY

法務大臣 殿
To the Minister of Justice

出入国管理及び難民認定法第21条第2項の規定に基づき、次のとおり在留期間の更新を申請します。
Pursuant to the provisions of Paragraph 2 of Article 21 of the Immigration Control and Refugee Recognition Act,
I hereby apply for extension of period of stay.



- 1. 40mm x 30mm
2. Facing forward without hat
3. No background
4. Clear and no shadow
5. Taken within 6 months before the submission day
6. Color, black/white acceptable

1 国籍・地域 Nationality/Region 中国
2 生年月日 Date of birth XXXX 年 X 月 X 日
3 氏名 Name AIZU TARO
4 性別 Sex 男・女
5 配偶者の有無 Marital status 有・無
6 職業 Occupation 学生
7 本国における居住地 Home town/city 中国 吉林省 長春市
8 住居地 Address in Japan 東京都新宿区西早稲田XX-X
9 電話番号 Telephone No. なし 携帯電話番号 Cellular phone No. 090-
10 旅券 (1)番号 Passport Number XX12345678 (2)有効期限 Date of expiration 20XX 年 X 月 X 日
11 現に有する在留資格 Status of residence 留学 在留期間 Period of stay X年
12 在留カード番号 Residence card number DUXXXXXXXXXEF
13 希望する在留期間 Desired length of extension 1年6か月
14 更新の理由 Reason for extension 例)会津大学で勉強を続けるため
15 犯罪を理由とする処分を受けたことの有無 (日本国外におけるものを含む。)※交通違反等による処分を含む。
16 在日親族(父・母・配偶者・子・兄弟姉妹・祖父母・叔(伯)父・叔(伯)母など)及び同居者
Family in Japan (father, mother, spouse, children, siblings, grandparents, uncle, aunt or others) and cohabitants
有(「有」の場合は、以下の欄に在日親族及び同居者を記入してください。)・無

Filled in with Roman characters as in the passport. Filled in with BLOCK CAPITALS.

Name of Country and City (for China and Vietnam: XX City, XX province) Current Residence Address

If no telephone number, write "None".

Until the month of graduation, including the month in which the document was created. (For example, if the document is created in February and the student graduates in September of the same year, it is counted as '8 months'). If you need to extend your graduation, add the expected year and month of graduation to No. 14. Eg: To study at the University of Aizu (to graduate in October 2027)

Table with 7 columns: 続柄, 氏名, 生年月日, 国籍・地域, 同居の有無, 勤務先名称・通学先名称, 在留カード番号. Includes rows for family members and cohabitants.

※ 3について、有効な旅券を所持する場合は、旅券の身分事項ページのとおりに記載してください。
Regarding item 3, if you possess your valid passport, please fill in your name as shown in the passport.
16については、記載欄が不足する場合は別紙に記入して添付すること。なお、「研修」、「技能実習」に係る申請の場合は、「在日親族」のみ記載してください。
Regarding item 16, if there is not enough space in the given columns to write in all of your family in Japan, fill in and attach a separate sheet.
In addition, take note that you are only required to fill in your family members in Japan for applications pertaining to "Trainee" or "Technical Intern Training".

(注) 裏面参照の上、申請に必要な書類を作成して下さい。
Note : Please fill in forms required for application. (See notes on reverse side.)
(注) 申請書に事実と異なる記載をしたことが判明した場合には、不利益な扱いを受けることがあります。
Note : In case of to be found that you have misrepresented the facts in an application, you will be unfavorably treated in the process.

17 通学先 Place of study

(1)名称 **会津大学**
Name of school

(2)所在地 **福島県会津若松市一箕町鶴賀** (3)電話番号 **0242-37-2773**
Address Telephone No.

(18及び19は在留資格変更許可申請又は進学若しくは転学の場合に記入)

(Fill in 18 and 19 in case of applying for a change of status, going to a higher school or changing your school)

18 修学年数 (小学校～最終学歴) 年
Total period of education (from elementary school to last institution of education) Years

19 最終学歴 (又は在学中の学校) Education (last school or institution) or present school

(1)在籍状況 卒業 在学中 休学中 中退
Registered enrollment Graduated In school Temporary absence Withdrawal

大学院 (博士) 大学院 (修士) 大学 短期大学 専門学校
Doctor Master Bachelor Junior college College of technology

高等学校 中学校 小学校 その他 ()
Senior high school Junior high school Elementary school Others

(2)学校名 (3)卒業又は卒業見込み年月 年 月
Name of the school Date of graduation or expected graduation Year Month

20

21

20, 21 are for the university to fill.

Fill in the same information as on Statement of Financial Support

Fill in the combined amount of tuition fees and living expenses in monthly amounts.

22 滞在費の支弁方法等(生活費, 学費及び家賃等全てについて記入すること。)※複数選択可
Method of support to pay for expenses while in Japan(fill in with regard to living expenses, tuition and rent) * multiple answers possible

(1)支弁方法及び月平均支弁額 Method of support and an amount of support per month (average)

本人負担 円 在外経費支弁者負担 **200,000** 円
Self Yen Supporter living abroad Yen

在日経費支弁者負担 円
Supporter in Japan Yen

その他 円
Others Yen

Carrying: enter the total amount carried in the past year.
Remittances: enter the annual or monthly amount. (e.g. 3 million/year, 200,000/month).
If you have received your accommodation allowance by UnionPay card or other means, enter the annual or monthly amount in the Other (column) and write (UnionPay card) in the margin.

(2)送金・携行等の別 Remittances from abroad or carrying cash

外国からの携行 円 外国からの送金 **2,400,000/年** 円
Carrying from abroad Yen Remittances from abroad Yen

Enter if the applicant, overseas sponsor or sponsor in Japan is selected in (1).
If you have selected both the person who pays his/her own expenses and the person who pays the expenses of the person living abroad / in Japan, fill in the information of the person who pays the expenses of the person living abroad / in Japan. If you have no annual income, cross out "annual income" with a double line, correct it to "deposit balance" and enter the deposit balance.

(携行者) Name of the individual carrying cash

(3)経費支弁者(複数記入する場合)は主としてこの欄に記入すること。)*他紙様式が別添付
Supporter(If there is more than one, give information on all of the supporters)*another paper may be attached, which does not have to use a prescribed format.

①氏名 **AIZU ICHIRO**
Name

②住所 **中国吉林省長春〇〇-△△** 電話番号 **〇〇〇-△△△**
Address Telephone No.

③職業(勤務先の名称) **経理/△△有限公司** 電話番号 **〇〇〇-□□□**
Occupation (place of employment) Telephone No.

④年収 **5,000,000** 円
Annual income Yen

Do no forget fill Phone numbers.

- (4)申請人との関係 **上記(1)で在外経費支弁者負担又は在日経費支弁者負担を選択した場合に記入)**
Relationship with the applicant (Check one of the followings when your answer to the question 22(1) is supporter living abroad or Japan)
- 夫 妻 父 母 祖父 祖母 養父 養母
Husband Wife Father Mother Grandfather Grandmother Foster father Foster mother
- 兄弟姉妹 叔父(伯父)・叔母(伯母) 受入教育機関 友人・知人
Brother / Sister Uncle / Aunt Educational institute Friend / Acquaintance
- 友人・知人の親族 取引関係者・現地企業等職員
Relative of friend / acquaintance Business connection / Personnel of local enterprise
- 取引関係者・現地企業等職員の親族 その他 ()
Relative of business connection / personnel of local enterprise Others

- (5)奨学金支給機関 **(上記(1)で奨学金を選択した場合に記入)※複数選択可**
Organization which provide scholarship (Check one of the following when the answer to the question 22(1) is scholarship)* multiple answers possible
- 外国政府 日本国政府 地方公共団体
Foreign government Japanese government Local government
- 公益社団法人又は公益財団法人 ()
Public interest incorporated association / Public interest incorporated foundation

If you currently have a part-time job, circle Yes and fill in (1) to (4). Also, fill in the details of your part-time job. If you do not have a part-time job, circle No.

23 資格外活動の有無 有 無
Are you engaging in activities other than those permitted under the status of residence previously granted? Yes / No
有の場合は、(1)から(4)までの各欄を記入(複数ある場合は全て記入すること)※任意様式の別紙可
Fill in (1) to (4) when your answer is "Yes". (Give the information for all of the companies if the applicant works for multiple companies)*another paper may be attached, which does not have to use a prescribed format.

(1)内容 **レジ係**
Type of work

(2)勤務先名称 **〇〇 コンビニ** 電話番号 **03-XXXX-XXXX**
Place of employment Telephone No.

(3)週間稼働時間 **15** 時間 (4)報酬 **70,000** 円 (月額 日額)
Work time per week Hour(s) Salary Yen Monthly Daily

- 24 卒業後の予定 Plan after graduation **← Indicate your plans at the time of application.**
- 帰国 日本での進学
Return to home country Enter a school of higher education in Japan
- 日本での就職 その他 ()
Find work in Japan Others

25 **25、26 are for the university to fill.**

26

以上の記載内容は事実と相違ありません。I hereby declare that the statement given above is true and correct.
申請人(法定代理人)の署名/申請書作成年月日 Signature of the applicant (legal representative) / Date of filling in this form

Aizu Taro **Signatures can be in Chinese characters, alphabetical characters, Hangul, etc.** 20XX 年 X 月 X 日
Year Month Day

注意 申請書作成後申請までに記載内容に変更が生じた場合、申請人(法定代理人)が変更箇所を訂正し、署名すること。
申請書作成年月日は申請人(法定代理人)が自署すること。
Attention In cases where descriptions have changed after filling in this application form up until submission of this application, the applicant (legal representative) must correct the part concerned and sign their name.
The date of preparation of the application form must be written by the applicant (legal representative).

No need to fill