

<b>Statement on Income Abroad</b>
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Mayor of Tsukuba City

I affirm that the statement below does not differ from the actual facts. If there is any false in the statement, I accept cancel of entrance to the facility, or order to leave the facility.

Date of writing:    Year            Month            Day

Address

Name of the person who makes this statement

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Name of the Facility

Name of Child

( Birthday : Year      Month      Day      )

Please fill out blanks and put ✓ on appropriate places. The fee is calculated based on the information you provide, therefore please fill out the following as accurately as possible.

Name of parents	Name of Father ( )	Name of Mother ( )
Name of country of resident registration as of 1 January 2025		
Employment (Before moving in Japan)	<input type="checkbox"/> Working outside <input type="checkbox"/> Self-employment <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/> Househusband <input type="checkbox"/> Other ( )	<input type="checkbox"/> Working outside <input type="checkbox"/> Self-employment <input type="checkbox"/> Unemployed <input type="checkbox"/> Student <input type="checkbox"/> Housewife <input type="checkbox"/> Other ( )
Income during January - December 2024	<input type="checkbox"/> Had income (Please write the amount)  <u>Amount of Income : /year</u> (in currency actually used at payment, <b>without converting into yen</b> )  <input type="checkbox"/> Had no income	<input type="checkbox"/> Had income (Please write the amount)  <u>Amount of Income : /year</u> (in currency actually used at payment, <b>without converting into yen</b> )  <input type="checkbox"/> Had no income
Proof of Income (Salary payment statement etc.)	<input type="checkbox"/> I have <input type="checkbox"/> I do not have (If you have, please attach.)	<input type="checkbox"/> I have <input type="checkbox"/> I do not have (If you have, please attach.)

Note

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