（Form 8）

International Student Life Report

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name | | Medicine/ Nursing | | | Student ID | | | | Grade |
|  | |  | | |  | | | |  |
| Income | | | Expenditure | | | | | | |
| Money sent from home | yen | | Food | yen | | Medical | | yen | |
| Scholarship  (organization: ) |  | | Housing |  | | Daily necessities | |  | |
| Part-time |  | | Traveling |  | | Books | |  | |
| Other Assistance（　　 　） |  | | Entertainment |  | | University Supplies | |  | |
| Other（ 　　　　　　　） |  | | Apparel |  | | Miscellaneous | |  | |
| Total |  | | Total | | | |  | | |

\*Enter the average monthly amount for FY2024.

\*For new students, enter the estimated amount.

以上のとおり相違ありません。

There is no error in the above.

　　　　　 　　 年　　 月　　 日

signature