

(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_____