

Scholarship Information

Scholarship	Ichikawa International Scholarship <2024-Spring> (No 020)
Eligibility (Please check “√” in the <input type="checkbox"/> , when submitting the application form.)	<input type="checkbox"/> An Asian student <input type="checkbox"/> who is studying as a regular student on a graduate course (Master’s course or Doctoral course) as of April 2024 and is in good health, both mentally and physically, displaying excellence in their studies and is in need of financial assistance. <input type="checkbox"/> who has conversational-level Japanese proficiency. <input type="checkbox"/> who is under 35 years old as of April 1, 2024.
Monthly Stipend	120,000 yen
Period	Up to 2 years from April 2024 *the shortest required period for course completion
Number of Nominees	4 students from Kobe University
Deadline	Sunday, February 4, 2024 for submission to the International Exchange Division (Deadlines are non-negotiable)
Final Result	Late March 2024
Multiple Scholarships	Students are not allowed to hold another scholarship during same period.
Requirements	<p>Currently enrolled students</p> <ul style="list-style-type: none"> • Please apply on GEMs, not by email. <p>Pre- enrollment students</p> <ul style="list-style-type: none"> • Please send an email to the International Exchange Division directly. E-mail: stdnt-ryulife@office.kobe-u.ac.jp • Please write the email as follows. Subject line: (No.〇〇) Applying for a scholarship Email text: I am applying for the following scholarship. Scholarship name:〇〇 (No.〇〇) Graduate School: Graduate School of △△ Your Name : □□□□ • Please fill in the application form for internal screening and attach to the email.
Notes	Currently enrolled students ; Please check the result on GEMs. Pre-enrollment students ; The International Exchange Division will inform the nominee <u>in early February</u> . Unsuccessful applicants will not be informed.
Advice/ Information	Selection process : screening of application materials

Ichikawa International Scholarship 2024spring (No.020) Application Form (for internal screening)

1. Name _____ Nationality _____
 (Kanji (Chinese Characters) or English)

2. Date of Birth _____ (Day) _____ (Month) _____ (Year) (Age:) (Male Female)
 (Single Married)

3. Faculty / Graduate School (Student Number: _____)
 Undergraduate Master Doctor
 _____ Faculty _____ Division _____ (Grade)

4. Present address (〒 _____) _____
(As of April 2024)

5. Cell phone number _____
 E-mail _____

6. Residence (Please the applicable answer.)
 Apartment Public housing Hyogo International Students House(HIH) Kobe University Dormitory
 Your own house (including the one that the parent or the spouse rents) Friend's house Homestay
 Others

* Monthly rent: _____ yen
 (Not including the common-area charge, Shiki-kin (the security deposit), the maintenance costs and food expenses.)
 Please fill in the rent divided proportionally, if sharing with other students.
 If you live with your family and/or spouse and pay the rent by yourself, you need not divide it proportionally.
 However, please fill in the rent divided proportionally, if your spouse is a student.)

7. Tuition fee exemption for previous academic years (Please the applicable answer.)
 Spring Semester in 2023: Not applied non-recognition a half-tuition fee exemption an entire-tuition fee exemption
 Autumn Semester in 2023: Not applied non-recognition a half-tuition fee exemption an entire-tuition fee exemption

8. Scholarship for the 2023 academic year (From April 2023 to March 2024)
 Scholarship: Yes No
 If yes, please fill in the scholarship's name and the monthly stipend.
 _____ (_____ yen per month)

9. Housemate in Japan
 ※If the housemate is your spouse and a MEXT scholarship student, please write "MEXT" after his / her name.

Housemate's Name	Relationship	Age	Housemate's office or school	Employee or Student

10. Allowance received from individuals in your home country (eg. from parents, guardians or other family members) *not including tuition fee payments.
 If no allowance, please fill in "N/A".
 _____ yen per month

11. Salary from current part-time job _____ yen per month

12. Please write the name of scholarship foundation which you applied FY2024 without university's recommendation

****ATTENTION: Any false statement in this application will result in cancellation of your nomination to the scholarship.**