

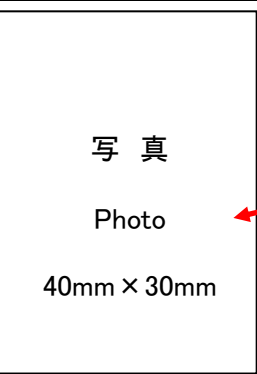
**SAMPLE**

**Use Black ink. No erasable ink. No double-sided printing.**

在留資格変更許可申請書  
APPLICATION FOR CHANGE OF STATUS OF RESIDENCE

法務大臣殿  
To the Minister of Justice

出入国管理及び難民認定法第20条第2項の規定に基づき、次のとおり在留資格の変更を申請します。  
Pursuant to the provisions of Paragraph 2 of Article 20 of the Immigration Control and Refugee Recognition Act,  
I hereby apply for a change of status of residence.



- 1. 4 cm long and 3 cm wide
- 2. Hatless and looking straight ahead
- 3. Without background
- 4. Clearly printed
- 5. Taken within 6 months before submission
- 6. Your name on the back
- 7. Color or black-and-white

Print your name exactly as it is written in your passport in the order of family name and given name, in uppercase alphabetic letters. (Do not write your name in KANJI.) If you wish to have your name written in KANJI on your residence card, you will need to separately submit the "Application for Indication of Name Using KANJI Characters on the Residence Card".

1 国籍・地域 Nationality/Region China 2 生年月日 Date of birth xxxx 年 Year x 月 Month x 日 Day

3 氏名 Name WASEDA TARO  
Family name Given name

4 性別 Sex 男 Male / 女 Female 5 出生地 Place of birth Beijing, China 6 配偶者の有無 Marital status 有 Married / 無 Single

7 職業 Occupation 学生 8 本国における居住地 Home town/city Changchun, Jilin, China

Be sure to write the name of the country, too. For China and Vietnam, write the name of the province as well as that of the city.

9 住居地 Address in Japan 東京都新宿区西早稻田XX-X

電話番号 Telephone No. N/A 携帯電話番号 Cellular phone No. 090-XXX

If you do not have a phone number, write N/A here.

10 旅券 (1) 番号 Passport Number XX123456789 (2) 有効期限 Date of expiration 20xx 年 Year x 月 Month

11 現に有する在留資格 Status of residence Dependent 在留期間 Period of stay X years X months

Fill in as stated on your residence card.

在留期間の満了日 Date of expiration 20xx 年 Year x 月 Month x 日 Day

Count the months until graduation including the month when you fill out this form. (For instance, if you are filling out this form in February and will graduate in September in the same year, you should write "8 months".) If you need to extend your enrollment, please add the expected month and year of graduation to number 14. Example: To study at Waseda University (expected graduation is September, 2000)

12 在留カード番号 Residence card number 987654321

13 希望する在留資格 Desired status of residence 留学

在留期間 Period of stay 2 years (審査の結果によって希望の期間とならない場合があります。 (It may not be as desired after examination.)

14 変更の理由 Reason for change of status of residence e.g.) To study at Waseda University

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。  
Criminal record (in Japan / overseas) ※Including dispositions due to traffic violations, etc.

有 (具体的内容) Yes (Detail: \_\_\_\_\_ ) / 無 No

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 No  
Yes (If yes, please fill in your family members in Japan and co-residents in the following columns)

続柄 Relationship	氏名 Name	生年月日 Date of birth	国籍・地域 Nationality/Region	同居の有無 Residing with applicant or not	勤務先名称・通学先名称 Place of employment/ school	在留カード番号 特別永住者証明書番号 Residence card number Special Permanent Resident Certificate number
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		
				有・無 Yes / No		

※ 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

Name of school

早稲田大学

(2)所在地

Address

東京都新宿区西早稲田1-6-1

(3)電話番号

Telephone No.

03-3203-9806

(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)

Total period of education (from elementary school to last institution of education)

16

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

Name of the school

〇〇 University

(3)卒業又は卒業見込み年月

Date of graduation or expected graduation

xx

年

xx

月

20

21

No need to fill out Section 20 or 21

Write the same information as written in the "Description of Expenses" !

Monthly amount of staying expenses (tuition and living expenses combined)

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)

Method of support to pay for expenses while in Japan (fill in with regard to living expenses, tuition and living expenses, multiple and other persons)

(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

奨学金

円

Supporter in Japan

その他

円

Carrying: total amount of carried cash for the past year

Remittance: yearly or monthly amount (ex. 3 million/yr., 200,000/yr.)

If you are receiving living expenses by credit card, write the yearly or monthly amount in "others" and write the name of the card in the blank space.

Others

Yen

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

外国からの携行

円

外国からの送金

1,200,000/year

円

Carrying from abroad

Remittances from abroad

(携行者

Name of the individual carrying cash

)  その他

1,200,000/year

円

Others

(〇〇card)

(3)経費支弁者

Supporter (if there is)

) ※任意様式の別紙可

may be attached, which does not have to use a prescribed format.

①氏名

Name

WASEDA ICHIRO

②住所

Address

1\* Zhong Guan Cun, Hai Dian Qu, Beijing, China

電話番号

Telephone No.

〇〇〇-△△△

③職業 (勤務先の名称)

Occupation (place of employment)

Accountant

If this supporter does not have an annual income, cross out "annual income" and write "account balance," and fill in the amount.

〇〇-△△△

④年収

Annual income

5,000,000

円

Do not forget to fill in both 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 ( )  その他 ( )  
Public interest incorporated association Public interest incorporated foundation Others

23 資格外活動の有無  
Are you engaging in activities other than those permitted under the status of residence previously granted?  
有の場合、(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  
Type of work **Casher**

(2)勤務先名称  
Place of employment **〇〇 Convenience store** 電話番号 **03-xxxx-xxxx**  
Telephone No.

(3)週間稼働時間  
Work time per week **15** 時間 (4)報酬 **70000** 円 (  月額  日額 )  
Hour(s) Salary Yen Monthly Daily

24 卒業後の予定 Plan after graduation  
 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

26

**No need to fill out Section 25 or 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

Signature of the applicant may be written in Kanji, Alphabet, Hangul, etc. **Waseda Taro** 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).

**Do not fill in this section.**