

# Form A

## 2024 Academic Year Ritsumeikan Asia Pacific University Domestic Student Dormitory Fee Reduction Application Form

For office use only (受付番号)

(1) Name		(3) Enrollment Period: <input type="checkbox"/> April <input type="checkbox"/> September						
		(4) Application Type: <input type="checkbox"/> Planning to apply ( ) <input type="checkbox"/> Already applied ( ) <input type="checkbox"/> Already accepted ( ) <input type="checkbox"/> Already completed the 1st Enrollment Procedures ( ) <input type="checkbox"/> Planning to enroll ( )						
Date of Birth (Y) / (M) / (D)								
(2) Name of school, educational institution, etc.								
Graduation (or expected) Year /Month /Day (Y) / (M) / (D)		(5) College: <input type="checkbox"/> College of Asia Pacific Studies <input type="checkbox"/> College of International Management <input type="checkbox"/> College of Sustainability and Tourism						
(6) Applicant Address	〒		E-mail: @					
			Home Phone: ( )					
			Cell Phone: ( )					
(7) Guardian's Address	〒		E-mail: @					
			Home Phone: ( )					
			Cell Phone: ( )					
(8) Family status	Non-sutudent family members	Relationship	Name	Age	Current Occupation	Place of employment and position	Circle	Circle if applicable
		Father					Living together / Living apart	Living apart for work / Divorced / Deceased
		Mother					Living together / Living apart	Living apart for work / Divorced / Deceased
							Living together / Living apart	
							Living together / Living apart	
							Living together / Living apart	
							Living together / Living apart	
	Students	Relationship	Name	Age	Name of Schools Currently Attending (As of April 2023)		Years of Study	Residence while enrolled
					<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At home <input type="checkbox"/> Away from home
					<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At home <input type="checkbox"/> Away from home
					<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At home <input type="checkbox"/> Away from home
					<input type="checkbox"/> National <input type="checkbox"/> Public <input type="checkbox"/> Private			<input type="checkbox"/> At home <input type="checkbox"/> Away from home
I declare the above information to be true.								
To the Ritsumeikan Asia Pacific Universtiy Dean of Student Affairs								
(9) Date: (Y) / (M) / (D)		(10) [Signature]						

## Form B

# Address Form

Please write your name and address in the box to the right and submit this form with your application.

### Important Note:

※Please specify an address where you will be able to receive notifications from APU regarding scholarship selection results.

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Address:

Name:

This line is for office use.  
Do not detach this section – submit the entire form intact