Form 4

Notification of Refusal of Student Emergency Aid for Continuance of Studies (for use by recipients of the New Higher Education Support system of 2020)

To:

President of the Japan Student Services Organization (JASSO)

I am a recipient of the scholarship from the Japan Student Services Organization（JASSO） and fulfill the requirements for receiving the Student Emergency Aid for Continuance of Studies; however, with this notification, I hereby decline receipt of the said Student Emergency Aid for Continuance of Studies.

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| Submission Date | Date (Year:\_\_\_ Month:\_\_\_\_ Day:\_\_\_\_) |
| Your School |  |
| Student ID # |  |
| Name | Kana (Family Name) |  | Kana (Given Name) |  |
| Kanji (Family Name) |  | Kanji (Given Name) |  |
| Date of Birth | Year:\_\_\_\_ Month:\_\_\_\_ Day: \_\_\_\_ | Phone # |  |