

Certificate of Salary Payment

Date of hiring (initiation of employment): Heisei/Reiwa Y M D

Name _____

*Please certify the salaries paid for work performed from January to June 2020.

(For details of how to complete this form, please refer to the attached “How to complete the Certificate of Salary Payment form (for employers)”)

Year and month of payment (month of work)	Amount paid	Notes
Reiwa 2 January (for)	yen	
February (for)		
March (for)		
April (for)		
May (for)		
June (for)		

*Please enter the total amounts paid to the bank account of the applicant (or paid in cash to the applicant), including allowances such as commuting allowances and bonuses.

This form will be used to confirm whether the applicant satisfies the requirements for the scholarship. We appreciate your kind cooperation.

I hereby certify that the above information is true and correct.

Reiwa Y M D

Certifier (business owner)

Address

Telephone

Name

Seal