




EXTENSION OF PERIOD OF STAY

- Mid to long term residents in Japan who are not able to accomplish all their intended purposes before their period of stay expires may apply for an extension.
- The Immigration Services Agency of Japan accepts the Application for Extension of Period of Stay as early as 3 months prior to the period of stay expires.

Procedures

1. Complete the Application for Extension of Period of Stay For applicant parts and the corresponding supplementary documents that corresponds with your desired residence status.
 - [Complete list \(Japanese\)](#)
 - "Student" (Excel ) , Example
 - "Artist / Cultural Activities" (Excel ) , Example
 - "Professor" (Excel ) , Example
 - [Using Excel to fill in the application](#)
2. Refer to required items list and prepare the required items
 - ["Student" Required Documents List](#)
 - ["Cultural Activities" Required Documents List](#)
 - ["Professor" Required Documents List](#)
3. Submit the Application for Extension of Period of Stay For applicant parts to JUIC.
 - Sakura Campus students and staff should submit the application to the Sakura Campus Administrative Department.
 - Hongo-Ochanomizu Campus staff who receive a salary from Juntendo University submit the application to the Personnel Affairs Department.
4. Submit the required items to the Immigration Services Agency of Japan. If necessary submit the [Notification of Accepting Organization](#) too.
5. Immigration Services Agency of Japan may take 2 weeks to 1 month to review the application.
 - The Immigration Services Agency of Japan may request additional items not listed on the required items list.
6. When the Immigration Services Agency of Japan completes the review they will send you a postcard telling you to pick up your new residence card may take 2 weeks to 1 month to review the application.
7. Report the results of the review to JUIC.
 - Applicants who receive a new residence card must submit the [Status of Residence / Part-time Job Notification Form](#).

EXTENSION OF PERIOD OF STAY REQUIRED ITEMS

Residence Status: "Student"

	DOCUMENTS	NOTES
①	Application for Extension of Period of Stay For Applicant: Example For University	<ul style="list-style-type: none"> Use the Excel form Using excel to fill in the application document In Japanese or English One-sided printout ONLY In black, no erasable pens allowed Attach a photo taken within 3 months of the application Put your name on the back of photo No correction pens or tapes are allowed
②	Passport	
③	Residence Card	
④	Student ID	
⑤	Certificate of Enrollment	<ul style="list-style-type: none"> Hongo-Ochanomizu Campus students: <ul style="list-style-type: none"> Before requesting the certificate you must purchase a certificate ticket for ¥ 300 at the Academic Affairs Department (Century Tower, South Side, 13th Floor), cost ¥ 300, using the vending machine select : 医 (学部・大学院) 証明書【和文】 Submit the ticket to your Academic Administrative Office. Sakura Campus students: Sakura Campus Administrative Office First year students: Certificate of Admission / Letter of Acceptance Research students: Letter mentioning your period of enrollment and research theme
⑥	Transcript	<ul style="list-style-type: none"> First year students: Transcript from the last university/language school
⑦	Letter of Financial Support	<ul style="list-style-type: none"> Check if your application follows No.22 on the form. If an applicant finances them self, one of the following must be submitted: <ol style="list-style-type: none"> Certificate of the applicant's bank account balance Copy of the applicant's passbook, must include transaction history of last one year and the passbook number Certificate of scholarship If an applicant is financed by another person, one of the following must be submitted: <ol style="list-style-type: none"> Certificate of the supporter's bank account balance Copy of the supporter's passbook, must include transaction history of last one year and the passbook number Copy of the applicant's passbook, must include transaction history of last one year, passbook number, money received from the supporter
⑧	Certificate for Payment of Fee with a ¥ 4,000 Revenue Stamp	<ul style="list-style-type: none"> Use the Certificate for Payment of Fee (Excel) form Purchase a ¥ 4,000 revenue stamp, available for purchase at the Japan Post

- Domestic certificates and official letters must be submitted within 3 months they were issued
- International certificates and official letters must be submitted within 6 months from issuance

EXTENSION OF PERIOD OF STAY EXAMPLE

Residence Status: "Student"

For applicant, part 1

別記第三十号の様式(第二十一条関係)
申請人等作成用 1
For applicant, part1

日本国政府法務省
Ministry of Justice, Government of Japan

在 留 期 間 更 新 許 可 申 請 書 APPLICATION FOR EXTENSION OF PERIOD OF STAY						
法 務 大 臣 殿 To the Minister of Justice						
出入国管理及び難民認定法第21条第2項の規定に基づき、次のとおり在留期間の更新を申請します。 Pursuant to the provisions of Paragraph 2 of Article 21 of the Immigration Control and Refugee Recognition Act, I hereby apply for extension of period of stay.						
1 国籍・地域 Nationality/Region	United States of America		2 生年月日 Date of birth	1992 年 12 月 31 日 Year Month Day		
3 氏 名 Name	TURNER ELIZABETH Family name Given name		4 性 別 Sex	男・女 Male/Female		
5 配偶者の有無 Marital status	有・無 Married / Single		6 職 業 Occupation	Student		
7 本国における居住地 Home town/city	Los Angeles, California, USA		8 住居地 Address in Japan	2-15-6-333, Sendagi, Bunkyo-ku Tokyo 113-0022		
9 電話番号 Telephone No.	N/A		携帯電話番号 Cellular phone No.	090-1234-5678		
10 旅券 (1)番 号 Passport Number	AB1234567		(2)有効期限 Date of expiration	2030 年 1 月 17 日 Year Month Day		
11 現に有する在留資格 Status of residence	Student		在留期間 Period of stay	2 years and 3 months		
在留期間の満了日 Date of expiration	2021 年 4 月 17 日 Year Month Day		12 在留カード番号 Residence card number	AB12345678CD		
13 希望する在留期間 Desired length of extension	4 years and 3 months		(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 更新の理由 Reason for extension	Complete Juntendo University Graduate School					
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。) 有 (具体的内容) Yes (Detail):	有・無 Yes / No		Criminal record (in Japan / overseas) 有・無 Yes / No			
16 在日親族(父・母・配偶者・子・兄弟姉妹など)及び同居者 Family in Japan(Father, Mother, Spouse, Son, Daughter, Brother, Sister or others) or co-residents	有・無 Yes / No					
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。) 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
	Brother	TURNER JOHN	92/7/22	USA	有・無 Yes / No	Japan University
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
					有・無 Yes / No	
※ 31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.)

Photo
- Plain Background
- Photo taken within the last 3 months
- No hats
- Clear and sharp

3. Write your full name as listed on your passport.

8. Address where you live and registered at your local Municipal Office.

9. Write N/A if you do not have a telephone number.

11. - Refer to your Residence Card.

13. Length should match the length of your program.

16. If you do not have any family members living in Japan circle "No".

Link How to insert circles in Excel.

For applicant, part 2

申請人等作成用 2 P (「留学」)

For applicant, part 2 P ("Student")

在留期間更新・在留資格変更用

For extension or change of status

17 通学先 Place of study

(1) 名称 Name of school Juntendo University

(2) 所在地 Address 2-1-1 Hongo, Bunkyo-ku, Tokyo, 113-8421 Japan

(3) 電話番号 Telephone No. 03-3813-3111

(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) 18 年
Total period of education (from elementary school to last institution of education) _____ 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 Los Angeles University

(3) 卒業又は卒業見込み年月 2019 年 5 月
Date of graduation or expected graduation _____ Year _____ Month

20 日本語能力 (専修学校又は各種学校において日本語教育以外の教育を受ける場合に記入)
Japanese language ability (Fill in the followings when you study at advanced vocational school or vocational school (except Japanese language))

☐ 試験による証明 Proof based on a Japanese Language Test

(1) 試験名 Name of the test _____ (2) 級又は点数 Attained level or score _____

☐ 日本語教育を受けた教育機関及び期間 Organization and period to have received Japanese language education

機関名 Organization _____

期間: _____ 年 _____ 月 から _____ 年 _____ 月 まで
Period from _____ Year _____ Month to _____ Year _____ Month

☐ その他 LEAVE THIS SECTION BLANK
Others _____

21 日本語学習歴 (高等学校において教育を受ける場合に記入)
Japanese education history (Fill in the following when you study in high school)

日本語の教育又は日本語による教育を受けた教育機関及び期間
Organization and period to have received Japanese language education / received education by Japanese language

機関名 Organization _____

期間: _____ 年 _____ 月 から _____ 年 _____ 月 まで
Period from _____ Year _____ Month to _____ Year _____ Month

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すること。) ※複数選択可
Method of support to pay for expenses while in Japan (fill in with regard to living expenses, tuition and rent) * multiple answers possible

(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 50,000 円
Self Yen Supporter living abroad Yen

☐ 在日経費支弁者負担 円 ☒ 奨学金 50,000 円
Supporter in Japan Yen Scholarship Yen

☐ その他 円
Others Yen

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

☒ 外国からの携行 5,000,000 円 ☒ 外国からの送金 50,000 円
Carrying from abroad Yen Remittances from abroad Yen

(携行者) Self 携行時期 2019/10/1) ☒ その他 円
Name of the individual carrying cash Date and time of carrying cash Others Yen

(3) 経費支弁者 (複数人いる場合は全てについて記載すること。) ※任意様式の別紙可
Supporter (If there is more than one, give information on all of the supporters) * another paper may be attached, which does not have to use a prescribed format.

① 氏名 Mary Turner
Name

② 住所 50 Los Angeles Drive, Los Angeles, CA, 12345, USA 電話番号 (123) 123-4567
Address Telephone No.

③ 職業 (勤務先の名称) Doctor 電話番号 (123) 123-4567
Occupation (place of employment) Telephone No.

④ 年収 5,000,000 円
Annual income Yen

17. Campus where you are studying.

18. - Only if applicable.
19. -

22. Select all of the options that apply to you from (1) - (3)

(2) Carrying from abroad: Total amount within the last year.

(3) If you are not being supported by someone abroad leave this section blank.

(3) ① If you are supported by more than one person provide an additional document listing the details.

For applicant, part 3

申請人等作成用 3 P (「留学」)

For applicant, part 3 P ("Student")

在留期間更新・在留資格変更用

For extension or change of status

(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 (Sato Scholarship Foundation) ☐ 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・無
Yes / No

有の場合は、(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

Customer Services

(2) 勤務先名称

Place of employment

Technology Company

電話番号

Telephone No.

03-1234-5678

(3) 週間稼働時間

Work time per week

15

時間

(4) 報酬

Hour(s)

25,000

円

()

月額

日額

24 卒業後の予定 Plan after graduation

☒ 帰国

Return to home country

☐ 日本での進学

Enter a school of higher education in Japan

☐ 日本での就職

Find work in Japan

☐ その他 ()

Others

25 本邦における申請人の監護人(通学先が中学校又は小学校の場合に記入)

Actual guardian in Japan (Fill in the following if the applicant is to study at a junior high school or elementary school)

(1) 氏名

Name

(2) 本人との関係

Relationship with the applicant

(3) 住所

Address

電話番号

Telephone No.

携帯電話番号

Cellular Phone No.

26 代理人(法定代理人による申請の場合に記入)

Legal representative (in case of legal representative)

(1) 氏名

Name

(2) 本人との関係

Relationship with the applicant

(3) 住所

Address

電話番号

Telephone No.

携帯電話番号

Cellular Phone No.

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

Elizabeth Turner

2021 年

3 月

28 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。
 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.

※ 取次者 Agent or other authorized person

(1) 氏名

Name

(2) 住所

Address

(3) 所属機関等(親族等については、本人との関係)

Organization to which the agent belongs (in case of a relative, relationship with the applicant)

電話番号

Telephone No.

(4) Select all corresponding to question (3).

(5) Leave this question blank if you do not have a scholarship.

23. Circle "No" if you do not have a part-time job.



24. Select answer that applies to your situation.

26. Hand written signature in your native language and date application submitted.

EXTENSION OF PERIOD OF STAY REQUIRED ITEMS

Residence Status “Cultural Activities”

For Hongo-Ochanomizu Campus Cooperating Researchers

	DOCUMENTS	NOTES
①	Application for Extension of Period of Stay For Applicant: Example For University	<ul style="list-style-type: none"> Use the Excel  form <ul style="list-style-type: none"> Using excel to fill in the application document In Japanese or English One-sided printout ONLY In black, no erasable pens allowed Attach a photo taken within 3 months of the application Put your name on the back of photo No correction pens or tapes are allowed
②	Passport	
③	Residence Card	
④	ID	
⑤	Certificate of Enrollment	<ul style="list-style-type: none"> Request at the Research Support Center, Building A, North Side, 2nd Floor. Before requesting the certificate you must purchase a certificate ticket for ¥ 300 at the Academic Affairs Department, Century Tower, South Side, 13th Floor, cost ¥ 300, using the vending machine select : 医（学部・大学院）証明書【和文】
⑥	Research Plan	<ul style="list-style-type: none"> Report from your department detailing your activities and what you plan to do during your remaining time in Juntendo University.
⑦	Letter of Financial Support	<ul style="list-style-type: none"> One of the following items: <ol style="list-style-type: none"> Certificate of the applicant's bank account balance Copy of the applicant's passbook, must include transaction history of last one year and the passbook number Certificate of scholarship Certificate the applicant will receive a salary while in Japan from an institution in their home country
⑧	Certificate for Payment of Fee with a ¥ 4,000 Revenue Stamp	<ul style="list-style-type: none"> Use the Certificate for Payment of Fee (Excel ) form Purchase a ¥ 4,000 revenue stamp, available for purchase at the Japan Post

- Domestic certificates and official letters must be submitted within 3 months they were issued
- International certificates and official letters must be submitted within 6 months from issuance

RESIDENCE STATUS

Extension of Period of Stay

Ministry of Justice, Government of Japan

For applicant, part1

Link [How to insert circles in Excel](#)

(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.)

For applicant, part 2

申請人等作成用 2 J (「芸術」・「文化活動」)

在留期間更新・在留資格変更用

For applicant, part 2 J ("Artist" / "Cultural Activities")

For extension or change of status

17 勤務先又は活動先 ※ (2)及び(3)については、主たる勤務先又は活動場所の所在地及び電話番号を記載すること。
Place of employment or activity For sub-items (2) and (3), give the address and telephone number of your principal place of employment/activity.

(1) 名称 Juntendo University 支店・事業所・研究室名 Department of Dermatology and Allergology
Name Name of branch, office or research room

指導教員(収入を伴わない学術上の活動を行うために「文化活動」での在留を希望する場合に記入)
Advisor (Fill in this section if you wish to reside in Japan with the status of residence of "Cultural Activities" in order to engage in academic activities that provide no income)

Susumu Sato, M.D., Ph.D.

(2) 所在地 2-1-1 Hongo, Bunkyo-ku, Tokyo, 113-8421 Japan (3) 電話番号 03-3813-3111
Address Telephone No.

18 活動内容 Type of activity

(1) 「芸術」での在留を希望する場合 Fill in this section if the applicant wishes to reside in Japan with the status of residence of "Artist"

☐ 著述家 ☐ 著述家(指導) ☐ 美術家・写真家 ☐ 美術家(指導)・写真家(指導)
Author Author (teaching) Artist/photographer Artist (teaching) /photographer (teaching)

☐ 音楽家・舞台芸術家 ☒ LEAVE THIS SECTION BLANK ☐ その他()
Musician/stage artist Musician (teaching)/stage artist (teaching) Others

(2) 「文化活動」での在留を希望する場合 Fill in this section if the applicant wishes to reside in Japan with the status of residence of "Cultural Activities"

☐ 芸術上の活動)
Artistic activities

☒ 学術上の活動 Research)
Academic activities

☐ 我が国特有の文化又は技芸についての専門的な研究)
Pursuing specific studies on Japanese culture or arts

☐ 専門家の指導を受けて我が国特有の文化又は技芸を修得する活動)
Learning and acquiring Japanese culture or arts under the guidance of expert

19 経歴 Personal history

始期 Start		終期 Finish		経歴 Personal history	始期 Start		終期 Finish		経歴 Personal history
年 Year	月 Month	年 Year	月 Month		年 Year	月 Month	年 Year	月 Month	
2005	9	2009	5	Los Angeles University, BA	2016	9	2019	8	Los Angeles Hospital, Fellowship
2009	8	2013	5	Los Angeles University, MD	2019	9	2020		Los Angeles Hospital, Attending Physician
2013	7	2016	7	Los Angeles University, Residency					

(20は「文化活動」での在留を希望する場合に記入)
(Fill in 20 when you desire to stay by status of residence "Cultural Activities")

20 滞在費支弁方法 Method of support to pay for expenses while in Japan

(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 円
Self Yen Supporter living abroad Yen

☐ 在日経費支弁者負担 円 ☒ 奨学金 200,000 円
Supporter in Japan Yen Scholarship Yen

☐ その他 円
Others Yen

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

☒ 外国からの携行 5,000,000 円 ☐ 外国からの送金 円
Carrying from abroad Yen Remittances from abroad Yen

(携行者) 携行時期 () ☐ その他 円
Name of the individual Self Date and time of 2019/10/1 Others Yen
carrying cash carrying cash

17. (2) Address and telephone number of the campus where you will study.

18. (1) Leave this question blank.

18. (2) Select "Academic Activities" and list the academic activities you will complete

19. List your academic and employment history.

20. Select all of the options that apply to you from (1) - (2)

For applicant, part 3

申請人等作成用 3 J (「芸術」・「文化活動」)
For applicant, part 3 J ("Artist" / "Cultural Activities")在留期間更新・在留資格変更用
For extension or change of status

21	代理人(法定代理人による申請の場合に記入) Legal representative (in case of legal representative)
(1)氏 名 Name	(2)本人との関係 Relationship with the applicant
(3)住 所 Address	LEAVE THIS SECTION BLANK
電話番号 Telephone No.	携帯電話番号 Cellular Phone No.

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

Elizabeth Turner 2021 年 3 月 28 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。
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.

※	取次者 Agent or other authorized person
(1)氏 名 Name	(2)住 所 Address
(3)所属機関等(親族等については) LEAVE THIS SECTION BLANK 電話番号 Organization to which the agent belongs (in case of a relative, relationship with the applicant) Telephone No.	

21. Hand written signature in your native language and date application submitted.

EXTENSION OF PERIOD OF STAY REQUIRED ITEMS

Residence Status: "Professor"

	DOCUMENTS	NOTES
①	Application for Change of Status of Residence For Applicant: Example For University	<ul style="list-style-type: none"> Use the Excel  form <ul style="list-style-type: none"> Using excel to fill in the application document In Japanese or English One-sided printout ONLY In black pen, no erasable pens allowed Attach a photo taken within 3 months of the application Put your name on the back of photo No correction pens or tapes are allowed
②	Passport	
③	Residence Card	
④	University ID	
⑤	Employment Certificate	<ul style="list-style-type: none"> Hongo-Ochanomizu Campus staff: Request at the Personnel Affairs Department, Century Tower, North Floor, 15th Floor Sakura Campus staff: Sakura Campus Administrative Office The certificate should list your position, employment period, and salary.
⑥	Certificate for Payment of Fee with a ¥ 4,000 Revenue Stamp	<ul style="list-style-type: none"> Use the Certificate for Payment of Fee (Excel  form) Purchase a ¥ 4,000 revenue stamp, available for purchase at the Japan Post

- Domestic certificates and official letters must be submitted within 3 months they were issued
- International certificates and official letters must be submitted within 6 months from issuance

RESIDENCE STATUS

Extension of Period of Stay

別記第三十号の二様式(第二十一条関係)
 申請人等作成用 1
 For applicant, part1

日本国政府法務省
Ministry of Justice, Government of Japan

在留期間更新許可申請書 APPLICATION FOR EXTENSION OF PERIOD OF STAY							写真 Photo 40mm × 30mm	
法務大臣殿 To the Minister of Justice								
出入国管理及び難民認定法第21条第2項の規定に基づき、次のとおり在留期間の更新を申請します。 Pursuant to the provisions of Paragraph 2 of Article 21 of the Immigration Control and Refugee Recognition Act, I hereby apply for extension of period of stay.								
1 国籍・地域 Nationality/Region	United States of America			2 生年月日 Date of birth	1988 年 Year	12 月 Month	31 日 Day	
3 氏名 Name	TURNER Family name			ELIZABETH Given name				
4 性別 Sex	男・女 Male/Female				5 配偶者の有無 Marital status	有・無 Married / Single		
6 職業 Occupation	Researcher			7 本国における居住地 Home town/city	Los Angeles, California, USA			
8 住居地 Address in Japan	1-1-1-333, Sendagi, Bunkyo-ku Tokyo 113-0022							
9 電話番号 Telephone No.	N/A			携帯電話番号 Cellular phone No.	090-1234-5678			
10 旅券(1)番号 Passport Number	AB1234567			(2)有効期限 Date of expiration	2030 年 Year	1 月 Month	17 日 Day	
11 現に有する在留資格 Status of residence	Professor			在留期間 Period of stay	1 year			
在留期間の満了日 Date of expiration	2021 年 4 月 17 日 Year Month Day							
12 在留カード番号 Residence card number	AB12345678CD							
13 希望する在留期間 Desired length of extension	1 year			(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 更新の理由 Reason for extension	Work at Juntendo 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。) 有(具体的内容) Yes (Detail):	Criminal record (in Japan / overseas)) ・ 無) / NO			
16 在日親族(父・母・配偶者・子・兄弟姉妹など)及び同居者 Family in Japan(Father, Mother, Spouse, Son, Daughter, Brother, Sister or others) or co-residents (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。) Yes (if yes, please fill in your family members in Japan and co-residents in the following columns)) ・ 無) / NO							
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		
Brother	John Turner	86/1/22	USA	有・無 Yes/No	Japan University	AB12345678CD		
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				
				有・無 Yes / No				

※ 31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.)

16. If you do not have any family members living in Japan circle "No".

Link [How to insert circles in Excel](#)

For applicant, part 2

申請人等作成用 2 I (「高度専門職(1号イ)」・「高度専門職(2号)」・「教授」・「教育」) 在留期間更新・在留資格変更用
(変更申請の場合のみ) For extension or change of status

For applicant, part 2 I ("Highly Skilled Professional(i)(a)" / "Highly Skilled Professional(ii)" (only in cases of change of status) / "Professor" / "Instructor")

17 稼働先		※ 所在地及び電話番号については、主たる勤務場所の所在地及び電話番号を記載すること。 For sub-items address and telephone number, give the address and telephone number of your principal place of work.	
(1) 名称 Name	Juntendo University		
所在地 Address	2-1-1, Hongo, Bunkyo-ku, Tokyo 113-8421 JAPAN		電話番号 Telephone No. 03-3813-3111
(2)及び(3)は、稼働先が複数ある場合に記入) (Fill in (2) and (3) in cases of working a number of places.)			
(2) 名称 Name			
所在地 Address			電話番号 Telephone No.
(3) 名称 Name			
所在地 Address			電話番号 Telephone No.
18 最終学歴 Education (last school or institution)			
<input checked="" type="checkbox"/> 大学院 (博士) Doctor	<input type="checkbox"/> 大学院 (修士) Master	<input type="checkbox"/> 大学 Bachelor	<input type="checkbox"/> 短期大学 Junior college
<input type="checkbox"/> 高等学校 Senior high school	<input type="checkbox"/> 中学校 Junior high school	<input type="checkbox"/> その他 () Others	<input type="checkbox"/> 専門学校 College of technology
(1) 学校名 Name of school	Los Angeles University		(2) 卒業年月 Date of graduation 2018 年 5 月 Year Month
19 専攻・専門分野 Major field of study			
(18で大学院(博士)～短期大学の場合) (Check one of the followings when your answer to the question 18 is from doctor to junior college)			
<input type="checkbox"/> 法学 Law	<input type="checkbox"/> 経済学 Economics	<input type="checkbox"/> 政治学 Politics	<input type="checkbox"/> 商学 Commercial science
<input type="checkbox"/> 心理学 Psychology	<input type="checkbox"/> 教育学 Education	<input type="checkbox"/> 芸術学 Science of art	<input type="checkbox"/> 経営学 Business administration
<input type="checkbox"/> 理学 Science	<input type="checkbox"/> 化学 Chemistry	<input type="checkbox"/> 工学 Engineering	<input type="checkbox"/> 農学 Agriculture
<input type="checkbox"/> その他自然科学 () Others(natural science)	<input type="checkbox"/> 水産学 Fisheries	<input type="checkbox"/> 薬学 Pharmacy	<input type="checkbox"/> 医学 Medicine
<input type="checkbox"/> 文学 Literature	<input type="checkbox"/> 語学 Linguistics	<input type="checkbox"/> 社会学 Sociology	<input type="checkbox"/> 歴史学 History
<input type="checkbox"/> その他人文・社会科学 () Others(cultural / social science)	<input type="checkbox"/> 歯学 Dentistry	<input type="checkbox"/> 体育学 Sports science	<input type="checkbox"/> その他 () Others
(18で専門学校の場合) (Check one of the followings when your answer to the question 18 is college of technology)			
<input type="checkbox"/> 工業 Engineering	<input type="checkbox"/> 農業 Agriculture	<input type="checkbox"/> 医療・衛生 Medical services / Hygienics	<input type="checkbox"/> 教育・社会福祉 Education / Social welfare
<input type="checkbox"/> 商業実務 Practical commercial business	<input type="checkbox"/> 服飾・家政 Dress design / Home economics	<input type="checkbox"/> 文化・教養 Culture / Education	<input type="checkbox"/> 法律 Law
<input type="checkbox"/> その他 () Others	<input type="checkbox"/> その他 () Others	<input type="checkbox"/> その他 () Others	<input type="checkbox"/> その他 () Others
20 職歴 Employment history			
入社 Date of joining the company		退社 Date of leaving the company	
年 Year	月 Month	年 Year	月 Month
2018	6	2019	3
勤務先名称 Place of employment		勤務先名称 Place of employment	
Los Angeles University, Post Doc			
(21から23までは「教育」での在留を希望する場合に記入) (Fill in 21 to 23 when you desire to stay by status of residence "Instructor")			
21 教育に係る免許の有無 有・無 Teacher's certificate Yes / No			
22 教育しようとする科目に係る実務経験年数 年 Teaching experience of the subject that you teach Year(s)			
23 外国語による教育をしようとする場合は当該外国語により教育を受けた期間 年 Total period of receiving the foreign language education when you teach the foreign language Year(s)			

17. Campus where you are working.

(2) Only if applicable.

21. - Only if applicable.
23. ble.

For applicant, part 3

申請人等作成用 3 I (「高度専門職(1号イ)」・「高度専門職(2号)」・「教授」・「教育」) 在留期間更新・在留資格変更用
(変更申請の場合のみ) For extension or change of status

For applicant, part 3 I ("Highly Skilled Professional(i)(a)" / "Highly Skilled Professional(ii)" (only in cases of change of status) / "Professor" / "Instructor")

24	代理人(法定代理人による申請の場合に記入) Legal representative (in case of legal representative)
(1)氏名 Name	(2)本人との関係 Relationship with the applicant
LEAVE THIS SECTION BLANK	
(3)住所 Address	
電話番号 Telephone No.	携帯電話番号 Cellular Phone No.

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

Elizabeth Turner 2021 年 3 月 28 日
Year Month Day

注意 Attention

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。
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.

※ 取次者 Agent or other authorized person

(1)氏名 Name	(2)住所 Address
(3)所属機関等(親族等については、本人との関係) Organization to which the agent belongs (in case of a relative, relationship with the applicant)	電話番号 Telephone No.

21. Hand written signature in your native language and date application submitted.

USING EXCEL TO FILL IN THE APPLICATION DOCUMENTS

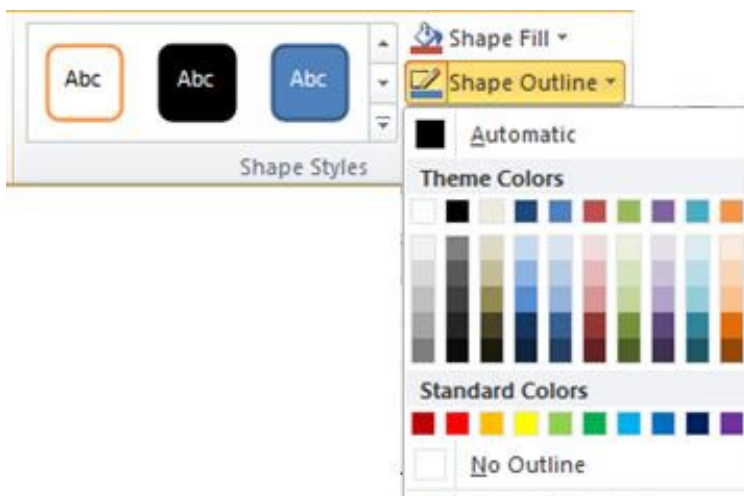
- International students and researchers who ask the International Center to help them complete the certificate of eligibility, extension of period of stay, or change of residence status procedures should submit the application forms to the International Center as excel files.
- The application files have a number of questions that require yes or no answers.
- Please complete the following procedures to indicate your response to a yes or no question on the application documents.

Procedures

- Select the "Insert" tab in excel.
- Select the "Shape" icon.
- Select the circle icon.



- Make a circle.
- Select "No Outline" for "Shape Fill" and black for "Shape Outline".
- Adjust the size of the circle to indicate your response.



Sample



在留資格確認書類/資格外活動 届出用紙

Status of Residence / Part-time Job Notification Form

順天堂大学では、出入国管理及び難民認定法第十九条の十七に基づき、外国人学生の在留資格を管理しています。本用紙に必要事項を記載し、以下の証明書等のコピーを貼って国際交流センターまで提出して下さい。

On the basis of Article 19-17, Immigration Control and Refugee Recognition Act, Juntendo University supervises the visa status of international students. Please submit this form with the copies of the required supporting documents to the International Center.

1. 以下のフォームにすべて記入して下さい。 Please fill in the form below.

氏名 Name	(フリガナ)		
	(アルファベット) (Alphabet)	(漢字)	
現住所 Address			
電話番号 Phone Number		Eメール Email	
生年月日 Date of Birth		国籍 Nationality	
所属・身分 Faculty and Student Status	<input type="checkbox"/> 医 Medicine <input type="checkbox"/> スポーツ健康科学 Health and Sports Science <input type="checkbox"/> 医療看護 Health Care and Nursing <input type="checkbox"/> 保健看護 Health Science and Nursing <input type="checkbox"/> 国際教養 International Liberal Arts <input type="checkbox"/> 保健医療 Health Science		<input type="checkbox"/> 学部生 Undergraduate <input type="checkbox"/> 研究生 Research Student <input type="checkbox"/> 大学院修士/博士前期課程 Master's <input type="checkbox"/> 大学院博士/博士後期課程 Doctorate <input type="checkbox"/> その他 Other
学年 Year		学籍番号 Student ID	
提出理由 Reason for Submission	<input type="checkbox"/> 新入生 New Student <input type="checkbox"/> 在留期間更新 Extension of Period of Stay <input type="checkbox"/> 在留資格変更 Change of Status of Residence <input type="checkbox"/> 記載内容の変更（住所など） Change of Registered Information (Ex. Address) <input type="checkbox"/> その他 Other		
資格外活動 Part-time Job	資格外活動（アルバイト）をしていますか？ Are you engaging in any part-time job? <input type="checkbox"/> 有 Yes → 以下の欄をすべて記入 / Fill in the form below. <input type="checkbox"/> 無 No		
勤務先名称 Place of Employment		勤務先住所 Address	
勤務先電話 Phone Number		勤務先担当者 Person in Charge	
業務内容 Detail of Activity			
雇用契約期間 Term of Employment Contract		週間稼働時間 Working Hours per Week	
この用紙で届け出る内容はすべて私自身の情報であり、誤りがないことを認めます。 I hereby declare that the information I have given on this form is true and correct to the best of my knowledge.			
署名 Signature		提出日 Date of Submission	

2. 在留カード等のコピーを貼って下さい。Please paste the copy of the document(s) below.

A. 「在留カード」(両面)

Copy of your Resident Card (both sides)

OR

B. その他、外交、公用、短期滞在等の場合：パスポートの顔写真と最新のビザのスタンプページ

For other visa statuses (for example: Diplomat, Official, Temporary Visitor, etc.):

Copy of your Passport (the page with your photo and the latest visa status stamp)

※「短期滞在」の方は速やかに「留学」等に変更手続きを行い、再提出して下さい。

If you have a Temporary Visitor visa, please promptly change your visa status (for example: to a “Student” visa) and resubmit this form again.

<個人情報の取扱について>

提供頂いた情報は、所属の学部・大学院事務室及び順天堂大学国際交流センターにて厳重に管理し、外国人在留管理業務以外の目的には利用しません。

<Privacy policy>

All personal information gathered will be strictly managed and will be used only for the purpose of residence management.