

Month, date, Year (発行日)

レターヘッドではない場合、ロゴなどを記載ください

Name of the organization (発行先)

Address in the United States (発行先の住所)

Certificate of Financial Support

To Whom It May Concern:

I, the undersigned, hereby certify, on behalf of Company Name (発行元名前), that Mr. /Ms. Applicant's Name here (申込者氏名) is our employee and has been granted a scholarship for studying at University of ABC (発行先の機関名).

This scholarship which has been awarded to him has no specific upper limit. We are prepared to underwrite all costs including tuition, books and supplies, housing expenses, and personal expenses he needs during his stay at your program. As a minimum amount, we are prepared to pay him US\$ XXXXX (支援金額) per year for Period here (支援する期間) from The time to move. (開始される日付)

If you have any question regarding his application, please do not hesitate to contact me.

Very Truly Yours,

発行元責任者の Signature を必ず入れて下さい

Name of the authorized personnel (発行元責任者氏名)

Title in the organization (発行元責任者の役職)

Name of the organization (発行元機関名)