

Be sure to fill in the application date.

The age of your child as of April 1 of the year in which you wish to enroll will be the age of the class.

~~*We do not accept applicati~~

Dear Mayor of Edoqawa Ward, I hereby submit the following application.

Be sure to sign it yourself.

- ◆ If you are planning to return to work at the time of applying for childcare leave, please check the "Working" box.
- ◆ If you have a job offer at the time of application, please check the "Working" box.

You can fill out the form for up to 2 children. If filling in for 3 or more children, please make a copy of the form.

Application for Approval of Education and Childcare Benefits and Application for Admission (Transfer) to a Childcare Facility (reverse side)

◎ I accept the information in the Admission Guide and apply for admission (transfer) to a daycare facility with the required documents.

Term of use	From 01/ <u>xx</u> MM/ <u>xx</u> YYYY <input checked="" type="checkbox"/> Until entering elementary school <input type="checkbox"/> Until the last day of <u> </u> MM/ <u> </u> YYYY } *Please check	
Reasons why childcare cannot be provided at home/reason for transferring to another facility	are working	
Name of the child applying ①	Furigana Edogawa Kisaku Edogawa Kisaku	Name of the child applying ② Furigana Edogawa Akabei Edogawa Akabei
Name of preferred facility	*Please do not abbreviate the name of the facility you wish to use or the circumstances of childcare services; make sure to write down the full name of the facility. If incorrect information is listed for the facility, it may be deemed invalid. *If you have already visited with your child, please indicate the date of the visit.	
First choice	△△ Nursery School Visited on <u>10</u> MM/ <u>8</u> DD	First choice △△ Nursery School Visited on <u>10</u> MM/ <u>8</u> DD
Second choice	○○ Nursery School Visited on <u> </u> MM/ <u> </u> DD	Second choice ○○ Nursery School Visited on <u> </u> MM/ <u> </u> DD
Third choice	□□ Nursery School Visited on <u>9</u> MM/ <u>25</u> DD	Third choice □□ Nursery School Visited on <u>9</u> MM/ <u>25</u> DD
Fourth choice	○△ Nursery School Visited on <u>9</u> MM/ <u>15</u> DD	Fourth choice
Fifth choice	□○ Nursery School Visited on <u> </u> MM/ <u> </u> DD	Fifth choice
Sixth choice and onwards	<input checked="" type="checkbox"/> ⇒ Please prepare and attach a separate sheet of paper for your sixth choice and subsequent choices.	<input type="checkbox"/> ⇒ Please prepare and attach a separate sheet of paper for your sixth choice and subsequent choices.
Current childcare situation	<input type="checkbox"/> <u> </u> am/is taking care of my child at home. <input type="checkbox"/> Accompanying <u> </u> to the workplace ⇒ Childcare center available (Yes/No) <input type="checkbox"/> I leave my child with a childcare provider (Name of childcare provider: <u> </u>) <input checked="" type="checkbox"/> The child is placed in a licensed childcare facility, certified childcare facility, company-led childcare facility, kindergarten, or other facility ⇒ Facility name <u> </u> ○○ Kindergarten (4 MM/5 YYYY - <u>5</u> days per week / Hours <u>9</u> : <u>30</u> ~ <u>14</u> : <u>00</u> .)	<input checked="" type="checkbox"/> Mother <u> </u> am/is taking care of my child at home. <input type="checkbox"/> Accompanying <u> </u> to the workplace ⇒ Childcare center available (Yes/No) <input type="checkbox"/> I leave my child with a childcare provider (Name of childcare provider: <u> </u>) <input type="checkbox"/> The child is placed in a licensed childcare facility, certified childcare facility, company-led childcare facility, kindergarten, or other facility ⇒ Facility name <u> </u> (<u> </u> MM/ YYYY - <u> </u> days per week / Hours <u> </u> : <u> </u> ~ <u> </u> : <u> </u> .)
Past attendance history [Nursery schools, kindergartens, etc.]	<input type="checkbox"/> No or only the facility child is currently attending <input checked="" type="checkbox"/> Yes ⇒ Facility name <u>△△ Nursery School</u> (4 MM R3 YYYY - 3 MM R5 YYYY)	<input checked="" type="checkbox"/> No or only the facility child is currently attending <input type="checkbox"/> Yes ⇒ Facility name <u> </u> (<u> </u> MM <u> </u> YYYY - <u> </u> MM <u> </u> YYYY)

If you are applying for a transfer, please enter the reason why you wish to transfer (e.g., because you are moving to a different area).

If you have already visited, please indicate the date.

*If you wish to apply for a private childcare facility, please visit the facility with your child before applying.

Please do not abbreviate the name of the facility you wish to use; make sure to write down the full name of the facility.

If you have a sixth choice and subsequent choices, check the box containing "sixth choice and onwards" box and write the date of application, the name of the guardian, the name of the child applying, and the name of the facility you wish to use on a separate sheet of paper, and submit it together.

*There is no upper limit to the number of choices, but please only fill in ones where attendance is possible.

Please do not abbreviate the name of the facility you wish to use; make sure to write down the full name of the facility.

If simultaneously applying for 2 or more children (siblings) *Please check one of the following, out of boxes (1) to (3).

☐ ① I wish to enroll my children only if I can enroll them during the same period and at the same childcare facility.

*Please note that if all siblings are unable to enter the same childcare facility at the same time, their admission will be put on hold.

☒ ② If they can be admitted at the same time, I wish to enroll them, even if they are placed at different childcare facilities.

Please select one of the items on the right... ☒ They can be placed in separate childcare facilities, and for each one, I would like for the most highly-preferred childcare facility to be given priority.
☐ I prioritize having my children placed at the same childcare facility, even if the facility ranks lower on the list of preferences.

*Please note that if all siblings are unable to enter the same childcare facility at the same time, it will result in a rejection for all siblings.

☐ ③ Even if only one child can be admitted, I wish for the child to be enrolled.

Please circle or write in who will take care of the child(ren) who is/are not admitted.

(☐ Because the childcare providers ☐ Certified childcare center/ ☐ Company-led childcare center ☐ Accompanying the workplace/ ☐ Grandparents/ ☐ Other ())

*If even one child is admitted to the preschool, he/she will be withdrawn from nursery school if the requirements for employment or other enrollment requirements are not met. Please consider who will take care of the child(ren) who is/are unable to attend nursery school.

◆ If you are applying for a private facility (first-time) in The admission-related decisions for the enrollment into the 0-year-old class private school, we will make selections for children for the 1-year-old class onwards, we will adjust the use of the service, taking into consideration the	If simultaneously applying for two or more children (siblings). Check the appropriate box. If you checked [(3) Even if only one child can be admitted to the school, I wish to apply] please be sure to enter the name of the person who will be taking care of the child who was not accepted at the nursery school. *For those who applied with the plan to return to work after childcare leave, if you are unable to return to work by the end of the month (includes the 1st day of the following month) enrollment, in principle, the offer of acceptance will be cancelled or the child will be withdrawn from the school.	Response ① or ② above If you checked [(1) I wish to enroll my children only if I can enroll them during the same period and at the same childcare facility] or [(2) If they can be admitted at the same time, I wish to enroll them, even if they are placed at different childcare facilities], please enter the screening for the first-time private school. From the second-time private school
History of withdrawing from school due to childcare leave Name of licensed childcare facility (<u> </u>)		sery school <u> </u> MM <u> </u> YYYY)

主管課 該当者	Please fill in if you left a licensed childcare facility pre-childcare leave because you obtained childcare leave.										備考
父											
母											
祖父	/	/	/	/	/	/	/	/	/	/	/
祖母	/	/	/	/	/	/	/	/	/	/	/
子	提出期限										

[Childcare provider / Certified childcare centers / Company-led childcare facilities / Child(ren) will come with me to work / Grandparents / Other ()]