

Example of entry (with separate filling-in instructions)

To the Mayor of Edogawa City

◆ If you are a corporation, please have your employer fill out the form. ◆ The "entry column for parents/guardians" must be filled out by the parents/guardians themselves.
◆ Entries made with an erasable ballpoint pen are invalid. ◆ Please print both sides of the form.
◆ Self-employed persons are required to submit a separate "document proving self-employment". For details, please refer to the "Guide to Admission to Approved Childcare Facilities".

Date of certification 4 DD/ 10 MM/ 2024 YYYY

Office name Edogawa-ku Co., Ltd.

If you are self-employed and do not have a trade name, please fill in "no trade name".

Name of representative Edogawa Taro

Address 1-4-1 Chuo, Edogawa-ku, Tokyo

Number 03 — xxxx — xxxx

Name of person in charge

Listed person's contact information 070 — xxxx — xxxx

I certify that the following information is true and correct.

*If you make or alter the contents of this certificate without the permission of your employer, you may be charged with a crime under the Penal Code.

No.	Item	Entry section
1	Industry	<input type="checkbox"/> Agriculture/forestry <input type="checkbox"/> Fishing <input type="checkbox"/> Mining, quarrying/gravel extraction industry <input type="checkbox"/> Construction industry <input type="checkbox"/> Manufacturing industry <input type="checkbox"/> Electric power, gas, heat supply industry <input type="checkbox"/> Telecommunications industry <input type="checkbox"/> Transportation/postal industry <input checked="" type="checkbox"/> Wholesale/retail industry <input type="checkbox"/> Financial/insurance industry <input type="checkbox"/> Real estate industry <input type="checkbox"/> Academic research, professional/technical services <input type="checkbox"/> Lodging/food service industry <input type="checkbox"/> Lifestyle-related services/entertainment industry <input type="checkbox"/> Education/learning support industry <input type="checkbox"/> Complex service industry <input type="checkbox"/> Official business <input type="checkbox"/> Other ()
2	Furigana	
	Full name of the individual	Edogawa Hanako
		Date of Birth 3 DD 7 MM 1982 YYYY
3	(Planned) Duration of employment, etc.	<input checked="" type="checkbox"/> Indefinite <input type="checkbox"/> Definite term (If the term is indefinite, only the employment start date) 1 DD 4 MM 2016 YYYY ~ DD MM YYYY
4	Place of employment	Name Edogawa Funabori Ekimae Branch Address △-Chome, O-Ban, O-Go, Funabori, Edogawa-ku, Tokyo
5	Form of employment	<input checked="" type="checkbox"/> Full-time employee <input type="checkbox"/> Part-time job <input type="checkbox"/> Temporary worker <input type="checkbox"/> Contract employee <input type="checkbox"/> Fiscal year appointed staff <input type="checkbox"/> Part-time/temporary staff <input type="checkbox"/> Independent business owner <input type="checkbox"/> Self-employed professional <input type="checkbox"/> Family worker <input type="checkbox"/> Side job <input type="checkbox"/> Outsourcing <input type="checkbox"/> Other ()
6	Number of hours worked (For fixed employment)	Mon <input checked="" type="checkbox"/> Tue <input type="checkbox"/> Wed <input checked="" type="checkbox"/> Thu <input checked="" type="checkbox"/> Fri <input checked="" type="checkbox"/> Sat <input checked="" type="checkbox"/> Sun <input type="checkbox"/> National holiday <input type="checkbox"/> Total hours Monthly 180 hours 0 minutes (includes minutes of break time 1200 minutes) Working days per month Monthly 20 Days Working days per week Weekly Days Weekdays (AM) 8 : 30 ~ (PM) 5 : 30 (includes minutes of break time 60 minutes) Saturday (AM) 8 : 30 ~ (PM) 5 : 30 (includes minutes of break time 60 minutes) Sunday and national holiday AM : ~ PM : (includes minutes of break time minutes)
	Number of hours worked (For irregular work)	Total hours <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly hours minutes (includes minutes of break time) Number of days worked <input type="checkbox"/> Monthly <input type="checkbox"/> Weekly Day Main working hours and shift hours AM PM : ~ AM PM : (includes minutes of break time minutes)
7	Flexible work record *Number of days includes paid vacations, and number of hours includes breaks and overtime	Month/Year 3 MM 2023 YYYY Month/Year 2 MM 2023 YYYY Month/Year 1 MM 2023 YYYY 21 Days/month 195 Hours/month 19 Days/month 200 Hours/month 20 Days/month
8	Acquisition of leave pre-natal/post-natal maternity *Including planned acquisitions	<input type="checkbox"/> Scheduled <input type="checkbox"/> now taking Period DD MM YYYY ~ DD MM
9	Acquisition of childcare leave *Including planned acquisition	<input type="checkbox"/> Scheduled <input checked="" type="checkbox"/> now taking <input type="checkbox"/> Acquired Period 2 DD 8 MM 2023 YYYY ~ 12 DD 6 MM 2025
10	Acquisition of leave other than maternity or childcare leave	<input type="checkbox"/> Scheduled <input type="checkbox"/> Now taking <input type="checkbox"/> Acquired Reason <input type="checkbox"/> Nursing care leave <input type="checkbox"/> Sick leave <input type="checkbox"/> Other () Period DD MM YYYY ~ DD MM YYYY
11	Date of (planned) return to work	<input checked="" type="checkbox"/> Planning to return to work <input type="checkbox"/> Already returned to work 13 DD 6 MM 2025 YYYY
12	Availability of short-time working system for childcare *Including planned acquisitions	<input checked="" type="checkbox"/> Scheduled <input type="checkbox"/> now taking Period 13 DD 6 MM 2025 YYYY ~ 31 DD 3 MM 2026 YYYY Main working hours and shift hours (AM) 9 : 30 ~ (PM) 4 : 30 (includes minutes of break time 60 minutes)
13	Work experience situation as a childcare worker	<input type="checkbox"/> Yes <input type="checkbox"/> Yes (planned) <input type="checkbox"/> None
14	Remarks column	
Additional fields of entry		
15	Employment situation	Job transfer away from home <input type="checkbox"/> Yes <input checked="" type="checkbox"/> None (Planned) Place of assignment
16	Fixed salary (monthly amount)	250,000 Yen *Monthly amount under the employment contract, not the amount of salary actually paid
17	Most recent salary payment record *Actual amount of salary paid	i 8 MM 2023 YYYY ii 2 MM 2023 YYYY iii 1 MM 2023 YYYY 266,000 Yen 273,000 Yen 260,000 Yen

Fill in the amount of salary (before deduction of taxes, social insurance premiums, etc.) that does not fluctuate each month, excluding bonuses, commuting allowances, and overtime allowances. Qualification, position and regional allowances are included. *If you work shorter hours, enter the amount without using the system.

Please use the remarks column for other contact information.
Example 1) For those who are in a type of occupation that requires a lot of business travel, both domestic and international....
"He / She has a business trip to 00 every year from 00 to 00."
Example 2) For temporary workers, etc... "His / Her place upon returning to work is undecided at this time. We / I have been offered reinstatement and will be making adjustments in Tokyo."

<Entry column for parents/guardians> Please have a parent/guardian fill out this form.

Entry column for parents/guardians	Name of child	Date of Birth	<input type="checkbox"/> Currently using <input type="checkbox"/> Transfer <input checked="" type="checkbox"/> Now applying (1st choice)	
	Edogawa Kisaku	13 DD 4 MM 2023 YYYY	Facility Name	○○ Nursery School
	Name of child	Date of Birth	<input type="checkbox"/> Currently using <input type="checkbox"/> Transfer <input checked="" type="checkbox"/> Now applying (1st choice)	
		DD MM YYYY	Facility Name	

If you are applying for a childcare facility, please fill in the name of your 1st choice.

[Note on entry] *Please be sure to read this information as it is very important. If you have any questions, please contact the departments below.

(1) This certificate is issued by a company or other entity to certify the employee's employment status. The certification will be invalidated if it is written by the parent/guardian himself/herself, except for private business owners, etc.
Those without a certification date (within 3 months of the application date) will also be considered invalid.

(2) If you make a false statement or forge or falsify a certificate, you may be criminally liable for forgery of a sealed private document, Article 159 of the Penal Code.
In addition, the certification and acceptance decision will be cancelled. Please be advised that our staff may call or visit you to confirm the details of the certification.

(3) Please cross out any corrections with a double line. However, certifications made with erasable ballpoint pens or pencils or with the use of correction fluid or correction tape will be considered invalid.

(4) If any violation of laws and regulations is found in working conditions, etc., the Labor Standards Inspection Office may be notified, depending on the circumstances.

(5) Please fill in the work record for the three months prior to the leave if you are taking maternity or childcare leave, or to the extent that the record has been finalized if the record is less than three months immediately after the start of employment.

(6) If you are applying for admission to a daycare facility (continued) or for entrustment of a childcare provider (continued) and are self-employed, please attach a copy of your tax return or a notification of business opening, etc. to confirm the details of your declaration

Childcare Division, Department of Children and Family Affairs, Edogawa Ward, Nursery School Section Tel: 03-5662-0066 (direct line),
Childcare Provider Section Tel: 03-5662-0072 (direct line), Childcare Support Division, Facility Use Benefits Section Tel: 03-5662-1012 (direct line)

